



Welcome to CENTRAL JERSEY ROAD RUNNERS CLUB
P.O. BOX 1863 CRANFORD, NJ 07016-5863



Name: _____

Street Address: _____

City: _____ State: _____ Zip Code: _____

Home/Cell Phone #: _____ Work/Cell Phone #: _____

Date of Birth: _____ Email Address: _____

Gender: Female Male If you are a USATF-NJ Member please provide your # _____

Would you like to participate on CJRRC's teams at races? _____

Membership Fees: Please check one

Please Note: Renewals more than 60 days past due date will be at the corresponding New Member Rate

New Members	Membership Renewals
<input type="radio"/> \$20 = 1 year new individual membership	<input type="radio"/> \$15 = 1 year renewal individual membership
<input type="radio"/> \$30 = 1 year new family* membership	<input type="radio"/> \$25 = 1 year renewal family* membership
<input type="radio"/> \$35 = 2 year new individual membership	<input type="radio"/> \$28 = 2 year renewal individual membership
<input type="radio"/> \$45 = 2 year new family* membership	<input type="radio"/> \$35 = 2 year renewal family* membership
<input type="radio"/> \$75 = 5 year new individual membership	<input type="radio"/> \$65 = 5 year renewal individual membership
<input type="radio"/> \$100 = 5 year new family* membership	<input type="radio"/> \$75 = 5 year renewal family* membership

Note “*”: Family is defined as Spouses or Domestic Partners and children (up to 25 years old) living at the same address. **Each member must fill out and sign a separate Membership Application.**

**Make checks payable to: Central Jersey Road Runners Club
and send with a self addressed stamped envelope to the address on the top of this application.**

I know that running in or volunteering for a road race is a potentially hazardous activity, which could cause injury or death. I will not run or volunteer unless I am physically able and properly trained (for specific assignments), and by my signature, I certify that I am able to perform in these events, and am in good health. I agree to abide by any decision of a race official relative to any aspect of my participation in these events, including the right of any official to deny or suspend my participation for any reason whatsoever.

Furthermore, I know that participating in any of CJRRC's events, such as club meetings and group runs, has potential hazards. I assume all risks associated with running, volunteering and participating in CJRRC's events, including but no limited to: falls, contact with participants and/or other volunteers, the effects of the weather, including frigid temperatures, snow and ice, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that if I see a potentially unsafe situation or a medical emergency that I will immediately notify the race director(s) and or on site emergency personnel. Having read this waiver and knowing these facts and inconsideration of your accepting me as a club member, runner and/or volunteer, I, for myself and anyone entitled to act on my behalf, covenant not to sue, and waive and release the CJRRC and all involved entities (including municipalities, the Road Runners Club of America, USATF-NJ, all event sponsors, their representatives and successors) from all claims or liabilities of any kind arising out of my participation in these events, even though that liability may arise out of negligence or carelessness on the part of the persons/entities named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

In addition, I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in any activities associate {sic.} with the club. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 in connection with my participation in any club activities, and personally assume this risk.

Signature (Parent's Signature if under 18 years old): _____

Date: _____

