



Phidippides Track Club Membership Registration/Waiver Form

Print and complete - mail or bring to the workouts:

Last Name: _____ First: _____ Initial: _____

Address: _____

City: _____ State: _____ Zip: _____ Gender: _____

Email(s): _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Member Last Year (Y/N)? _____ T-shirt Size - S, M, L, XL: _____

What primary race(s) are you training for this year? _____

Dues: \$65 per person per year

NOTE: Only paid Phidippides members with signed current year waiver on file are allowed to participate in workouts per CCSD regulations

Phidippides membership is from March to March. Make checks payable to:

Phidippides Track Club

Mail to: Jeff Ross: 5857 S. Fulton Way, Greenwood Village, CO 80111

For information, e-mail: jeff@phids.org

Or

Bring payment to workout: Give to Jeff Ross

I agree that I, _____ [NAME OF MEMBER] am a member of Phidippides Track Club, (hereinafter "Phids"), and I know that running in and volunteering for workouts, organized group runs, social events, and races associated with the club are potentially hazardous activities, which could cause injury or death. I will not participate in any club organized events, group training runs, or social events, unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform all activities associated with the club and am in good health, and I am properly trained.

I agree to abide by all rules established by Phids, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the Phids rules, including the weather policy, and I agree to abide by them. I assume all risks associated with being a member of Phids and participating in all Phids activities, which may include, but are not limited to: falls, injuries, physical contact with other "Individuals" (participants / members / volunteers / race personnel / contract service providers / employees / spectators / other facility users), including the potential for the contraction of a communicable disease resulting from contact with other Individuals. I assume all risks including: the effects of the weather; high heat and/or humidity; freezing cold temperatures; traffic and the conditions of the road including surrounding terrain; track conditions; field conditions; and trail conditions.

I further agree to abide by the Center for Disease Control's (CDC) recommendations for the prevention of the spread of the 2019 Novel Coronavirus Disease (COVID-19) and other communicable diseases, and I attest to having read the CDC's guidance at: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html>. I assume all such risks being known, appreciated, and accepted by me.

I understand that bicycles, skateboards, baby joggers / strollers, roller skates or inline skates, animals, and personal music players are not allowed in Phids organized runs or events, and I will abide by all Phids rules. Having read this waiver and knowing these facts and in consideration of your accepting my membership, I, for myself and anyone entitled to act on my behalf, waive and release Phidippides Track Club and the Road Runners Club of America ("RRCA"), all club sponsors, their representatives, and successors from all claims or liabilities of any kind arising out of my participation in Phids activities, even though that liability may arise out of negligence or carelessness on the part of the persons or organizations named in this waiver. 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 with Phids. 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 Phids activities, and personally assume this risk.

I grant permission to Phids and RRCA to use my photographs, motion pictures, recordings or any other record of Phids for any legitimate purposes. I understand that Phids does not provide for refunds in the event of cancellations of services, and by signing this waiver, I consent that I am not entitled to a refund if any Phids activities, including workouts and events, are cancelled.

Signature: _____

Date: _____

Parent's Signature if under 18 years: _____

Date: _____