



# Chesapeake Bay Running Club

## Membership Form

<input type="checkbox"/> New Membership <input type="checkbox"/> Annual Renewal	Membership Type: <input type="checkbox"/> Individual for 1 year - \$15 <input type="checkbox"/> Family for 1 year - \$25 <input type="checkbox"/> Individual for 3 years - \$40 <input type="checkbox"/> Family for 3 years - \$70 <input type="checkbox"/> Individual Youth (Under 18) - \$7.50		
FIRST NAME	LAST NAME	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Family Members (if applicable)			
FIRST NAME	LAST NAME (if different)	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
FIRST NAME	LAST NAME (if different)	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
FIRST NAME	LAST NAME (if different)	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
FIRST NAME	LAST NAME (if different)	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
FIRST NAME	LAST NAME (if different)	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
FIRST NAME	LAST NAME (if different)	BIRTHDATE __/__/____	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
Fill out this section for new memberships or if membership information has changed			
STREET ADDRESS	CITY	STATE	ZIP CODE
PHONE		EMAIL	
COMMUNICATION PREFERENCE:			
<input type="checkbox"/> Sign me up for the CBRC Yahoo Email group to receive CBRC announcements <input type="checkbox"/> I already get the club emails from the CBRC Yahoo Email group			
<small>           WAIVER &amp; RELEASE: I acknowledge that running in and volunteering for organized group runs, social events, and races associate 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 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 the club, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the club and agree to abide by them. I assume all risks associated with being a member of the club and participating in all club activities, which may include but not limited to: falls, physical contact with other participants/members, volunteers, race personnel, contract service providers, employees, and spectators including the potential the contraction of a communicable disease resulting from contact with other participants/members, volunteers, race personnel, contract service providers, employees, and spectators. 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. 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: <a href="https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html">https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html</a>. I assume all such risks being known, appreciated, and accepted by me. 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 the Chesapeake Bay Running Club and the Road Runners Club of America, all club sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in the club 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 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. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings, or any other record of the club for any legitimate purposes. I understand that the club 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 club activities including events are canceled.         </small>			
SIGNATURES OF ALL MEMBERS 18 AND OVER (PARENT OR GUARDIAN IF UNDER 18)			
_____	Date _____	_____	Date _____
_____	Date _____	_____	Date _____
Mail form and check to: Chesapeake Bay Running Club, P.O. Box 635, Solomons, MD 20688			



Registration also available at Active.com:

<https://endurancecui.active.com/event-reg/select-race?e=70344754>

12/05/2020