

Faerber's Flyers

www.hawaii.edu/run

Membership Application

Name _____
(Print last name, first, M.I.)

Address _____

City _____ State: _____ Zip Code _____

Contact numbers: Home _____ Work _____

E-Mail _____ Fax _____

Date of birth _____ Occupation _____

Amount paid _____ Date _____

Regular membership fee is \$25, of which \$1.25 goes toward Road Runners Club of America FootNotes magazine. Please write check to Faerber's Flyers.

Please mail this application along with your membership fee to:

Faerber's Flyers
P.O Box 4266
Honolulu, Hawaii 96812-4266

WAIVER

In consideration of your accepting my application, I, intending to be legally bound for myself, my heirs, executors and administrators, do hereby release and discharge the Faerber's Flyers, University of Hawai'i, Road Runners Club of America and any and all sponsors and their respective officers, directors, agents and employees jointly and severally from any and all liability for illness, injuries and damages I may suffer arising out of or resulting from my participation in this organization. I hereby represent and certify that I am over 18 years of age and that I have carefully read the foregoing release and know the contents thereof and that I have signed it of my own free will.

Member's signature _____ Date _____

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EMERGENCY DATA

In case of emergency, contact _____
(Full name)

Relationship _____

Contact number(s) _____

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