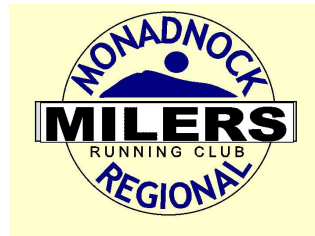


Membership Application

(revised 12-17-2023)

monadnockmilers.com



LAST NAME, FIRST NAME

DATE OF BIRTH

ADDRESS

SEX

AGE

New / Renewal

(please circle one)

CITY / TOWN

STATE

ZIP CODE

PHONE NUMBER

Membership levels

Basic

\$25

Supporting

\$50

Sponsor

\$100

See website for member level benefits

Email Address (to get monthly eNews!)

Children 12 years old or younger are free

SIGNATURE:

Date:

PARENT / GUARDIAN:

Date:

Mail Checks Made Payable To:
MONADNOCK REGIONAL MILERS
PO Box 63
Peterborough, NH 03458

INFORMATION HOTLINE send an email to: monadnockmilers@gmail.com

Club Disclaimer of Liability I KNOW THAT RUNNING A ROAD RACE IS A POTENTIALLY HAZARDOUS ACTIVITY. I SHOULD NOT ENTER AND RUN UNLESS I AM MEDICALLY ABLE AND PROPERLY TRAINED. I AGREE TO ABIDE BY ANY DECISION OF A RACE OFFICIAL RELATIVE TO MY ABILITY TO SAFELY COMPLETE THE RUN. I ASSUME ALL RISKS ASSOCIATED WITH THIS ACTIVITY, INCLUDING BUT NOT LIMITED TO: FALLS, TRAFFIC, CONTACT WITH OTHERS, WEATHER EFFECTS, INCLUDING ICE, SNOW, WIND, RAIN, AND CONDITIONS OF THE RACE SURFACE, ALL SUCH RISKS BEING KNOWN TO ME. HAVING READ THIS WAIVER AND KNOWING THESE FACTS AND IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, I, FOR MYSELF AND ANYONE ENTITLED TO ACT ON BEHALF, WAIVE AND RELEASE THE MONADNOCK REGIONAL MILERS, THE TOWN OF PETERBOROUGH, NEW HAMPSHIRE AND ALL SPONSORS, THEIR REPRESENTATIVES, AND SUCCESSORS FROM ALL CLAIMS OR LIABILITIES OF ANY KIND ARISING OUT OF MY PARTICIPATION IN THIS EVENT EVEN THOUGH THAT LIABILITY MAY ARISE OF NEGLIGENCE OR CARELESSNESS ON THE PART OF THE PERSON(S) NAMED IN THIS WAIVER. I GRANT PERMISSION TO ALL OF THE FOREGOING TO USE ANY PHOTOGRAPHS, MOTION PICTURES, RECORDINGS, OR ANY OTHER RECORD OF THIS EVENT FOR ANY LEGITIMATE PURPOSE.

* **Additional Names** (membership)

Name:	Age:
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Name:	Age:
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Name:	Age:
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Name:	Age:
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Name:	Age:
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Name:	Age:
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