



## MEMBERSHIP (OR RENEWAL) APPLICATION

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New Membership

Membership Renewal

Individual One Year Membership (\$25)  Individual Two Year Membership (\$50)

Student One Year Membership (\$20)  Student Two Year Membership (\$40)

Family One Year Membership (\$35)  Family Two Year Membership (\$70)

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### If you are a new member, how did you learn about KAR?

KAR Website  Event Expo  KAR Event  Borgess Run Camp  Gazelle Sports  YMCA  
 Referral from a friend \_\_\_\_\_ (name) Other \_\_\_\_\_

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### Primary Member Information

Primary Member Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Sex \_\_\_\_\_ Birth Date (MM/DD/YYYY) \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Business) \_\_\_\_\_ Email \_\_\_\_\_

Add email address to the KAR E-mail list (Y/N)? \_\_\_\_\_

I am interested in volunteering for Club Activities (Y/N)? \_\_\_\_\_

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### Family Membership Information

Family Member Name \_\_\_\_\_ Sex \_\_\_\_\_ Birth Date \_\_\_\_\_ Email \_\_\_\_\_

Family Member Name \_\_\_\_\_ Sex \_\_\_\_\_ Birth Date \_\_\_\_\_ Email \_\_\_\_\_

Family Member Name \_\_\_\_\_ Sex \_\_\_\_\_ Birth Date \_\_\_\_\_ Email \_\_\_\_\_

Add email addresses to the KAR E-mail list (Y/N)? \_\_\_\_\_

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In consideration of accepting my membership form, I hereby agree for myself, my heirs, executors and administrators, to waive and release all rights and claims for damages I may have against the Kalamazoo Area Runners, its race sponsors, officers, directors, and members and their agents, representatives, successors, and assignees for any and all injuries suffered by me as a result of participation in any Club activity or run, or which may arise out of my traveling to, participating in or returning from such events. Further, I agree to indemnify and hold harmless the Kalamazoo Area Runners, its members, officers and directors from any liability or expense resulting from my participation in any Club event. I also authorize the Kalamazoo Area Runners to utilize any photographs and/or video recordings of my participation in any Kalamazoo Area Runners program or event for any and all purposes.

Primary Member Signature \_\_\_\_\_

If Under 18, Parent's Signature \_\_\_\_\_

**Send completed form with check or money order to the following address:**

Kalamazoo Area Runners  
P.O. Box 393  
Portage, MI 49081