



Buffalo Chips Membership Application

The Buffalo Chips Running Club
P.O. Box 19908
Sacramento, CA.95819-0908
www.buffalochips.com

- Renewal, with change in membership info.
- Renewal, no change in membership info.
- New membership *Welcome to the Chips!*

Please indicate which of the following fields you would like listed in the club roster. Please print clearly.

- Name _____
- Address _____
- City & State _____ zip _____
- Home phone () -
- Work phone () -
- Birth date mo/day/yr _____
- Gender (check one) Male Female
- Occupation: _____
- Email address: _____

{ } Check here if all of the above information is to be omitted from the club roster.

We are a volunteer organization. Please volunteer with our team:

1. Newsletter _____
2. Social events _____
3. Finish Lines _____
4. Aid Station (Western States & CIM) _____
5. Jed Smith Ultras (Feb.) _____
6. Mud Run (Feb.) _____
7. 4th of July 5 Miler (July) _____
8. S.B. Anthony 5K (Aug.) _____
9. Buffalo Stampede (Sep.) _____
10. Board Member _____

Dues: (check one)

Annual

- Single \$35
- Family \$50
- Full time student / 21 years & under \$20

Lifetime

- Single \$350
- Family \$450

Family members: Spouse & children under 21 years.

- | | | | |
|---------------|-----------------|---------------|-----------------|
| 1. Name _____ | Birthdate _____ | 2. Name _____ | Birthdate _____ |
| 3. Name _____ | Birthdate _____ | 4. Name _____ | Birthdate _____ |

Benefits:

- ✓ Newsletters with club news, lots of pictures, insights, and special recognitions.
- ✓ Camaraderie with hundreds of other "Chips"
- ✓ Regular training groups and runs, several times a week. Please see current schedule on web site.
- ✓ Extensive web site with runner support tools.
- ✓ Annual *Buffalo Bash* social event in December for club awards.

CLUB MEMBERSHIP APPLICATION WAIVER

I know that running and volunteering to work in club races are potentially hazardous activities. I should not enter and run in club activities 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 running and volunteering to work in club races including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for membership, I, for myself and anyone entitled to act on my behalf, waive and release the Road Runners Club and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signature (**and** parent's signature if under 18 years) _____ Date _____ Amount enclosed \$ _____

Mail to:

Buffalo Chips Running Club, Attention: Membership, P.O. Box 19908, Sacramento, CA 95819-0908