



## Application for Membership or Renewal

Name.....

Address.....

.....

Family Members names specify gender (indicate M or F).....

.....

.....

.....

Email Address.....

Phone: .....

Mobile: .....

### Fees

Annual fee (as at Feb-2015)	
Single: \$15 per person	Family Group: \$20 per family
Weekly run/walk fee for financial members	
Single: \$2.00	Family Group: \$3.00
Weekly run/walk fee for non members	
Single: \$3.00	Family Group: \$5.00

### Declaration

I acknowledge that it is a condition of participation in this event that I do so at my own risk. I accept the risks and release the event organiser, their agents, affiliates, employers, members, sponsors, volunteers and any person or body directly or indirectly associated with this event from all claims, demands and proceedings arising out of or connected with my participation in this event. This release continues forever and binds my heirs, successors, executors and personal representatives.

Applicant's signature

Date

Day    Month    Year  
---/---/---

As individual member:

As family representative:

### Bank details:

Account Name Wagga Wagga Road Runners, BSB: 325-185, Account Number: 38701442

**Please Note: please add you name when doing a transfer.**