



Phidippides Track Club Membership Registration/Waiver Form

Print and complete - mail or bring to the workouts:

Last Name: _____ First: _____ Initial: _____

Address: _____

City: _____ State: _____ Zip: _____ Gender: _____

Email(s): _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Member Last Year (Y/N)? _____ T-shirt Size - S, M, L, XL: _____

What primary race(s) are you training for this year? _____

Dues: \$65 per person per year

NOTE: Only paid Phidippides members with signed current year waiver on file are allowed to participate in workouts per CCSD regulations

Phidippides membership is from March to March. Make checks payable to:

Phidippides Track Club

Mail to: Jeff Ross: 5857 S. Fulton Way, Greenwood Village, CO 80111

For information, e-mail: jeff@phids.org

Or

Bring payment to workout: Give to Jeff Ross

In consideration of acceptance of my membership in Phidippides Track Club, I for myself, my heirs, administrators and assigns, hereby waive, release and discharge any all rights and claims for damages against Phidippides Track Club and its officers and agents for any claims of damages in any manner arising of resulting from my participation in any activity conducted by or under the auspices of Phidippides Track Club.

Signature: _____ Date: _____