Updated: 2021-11-15



Golden Isles Track Club (GITC) is a 501c3 non-profit organization created to promote fun in fitness and dedicated to the idea that exercise can be fun for the young and the young at heart!

Walkers, runners, cyclists comprise our membership; we take part in exercise activities as well as endeavors to benefit our local community. Members are notified by email about Fun Runs, GITC Social Gatherings and Quarterly Membership Meetings.

Members are automatically enrolled in the **Road Runners Club of America (RRCA)** Please fill in your information below and sign the waiver on the other side of this form

| Address: | | | | | |
|----------------------|-----------------------|-------------------------|---------------------|---------------|---------------|
| City, State, Zip co | de: | | | | |
| Email: | | | | | |
| Mobile: | | | | | |
| | | | | | |
| For family member | erships, please add | the following. | | | |
| Name: | | Email: | | | |
| Name: | | Email: | | | |
| Name: | | Email: | | | |
| Yes, I would like to | volunteer! I am inter | rested in (please circl | le all that apply): | | |
| Race Organization | Registration | Finish Line | Finding Sponsors | Race Director | Course Set-up |
| Water Stops | Securing food/wate | r Course Monitor | Publicity | Results | Other |

Membership runs from **January** to **December**.

Dues: Family \$20.00 Individual: \$15.00 Student \$5.00

For more information or to sign up signup and pay online visit www.goldenislestrack.club

Or mail this completed form to: Golden Isles Track Club, PO Box 20651, St. Simons Island, GA 31522

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| I agree that I, | [NAME OF MEMBER] |
|---|--|
| am a member of Golden Isles Track Club, (hereinafter "the cl | ub"), and I know that running in and |
| volunteering for organized group runs, social events, and races | s associate with the club are potentially |
| hazardous activities, which could cause injury or death. I will no | ot participate in any club organized events, |
| group training runs or social events, unless I am medically able | and properly trained, and by my signature, I |
| certify that I am medically able to perform all activities associate | ed with the club and am in good health, and I |
| am properly trained. I agree to abide by all rules established by | y the club, including the right of any official to |
| deny or suspend my participation for any reason whatsoever. I | attest that I have read the rules of the club |
| and agree to abide by them. I assume all risks associated with | being a member of the club and participating |
| in all club activities, which may include but no limited to: falls, p | hysical contact with other |
| participants/members, volunteers, race personnel, contract ser | vice providers, employees, and spectators |
| including the potential the contraction of a communicable disea | se resulting from contact with other |
| participants/members, volunteers, race personnel, contract ser | vice providers, employees, and spectators. I |
| assume all risks including: the effects of the weather; high heat | and/or humidity; freezing cold temperatures; |
| traffic and the conditions of the road including surrounding terra | ain. I further agree to abide by the Center for |
| Disease Control's (CDC) recommendations for the prevention of | of the spread of the 2019 Novel Coronavirus |
| Disease (COVID-19) and other communicable diseases, and I | attest to having read the CDC's guidance at: |
| https://www.cdc.gov/coronavirus/2019-ncov/prepare/preventior | n.html. I assume all such risks being known, |
| appreciated, and accepted by me. | _ |
| | |

Having read this waiver and knowing these facts and in consideration of your accepting my membership, I, for myself and anyone entitled to act on my behalf, waive and release the **Golden Isles Track Club** and the Road Runners Club of America, all club sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in the club activities, even though that liability may arise out of negligence or carelessness on the part of the persons or organizations named in this waiver. In addition, I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in any activities associated with the club. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand the risk of becoming exposed to or infected by COVID-19 in connection with my participation in any club activities, and personally assume this risk.

I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of the club for any legitimate purposes. I understand that the club does not provide for refunds in the event of cancellations of services, and by signing this waiver, I consent that I am not entitled to a refund if any club activities including events are cancelled.

| Signature: | | |
|-------------------------------|----------|------|
| Date: | | |
| | | |
| | | |
| Parent's Signature if under 1 | 8 years: | |
| Date: | | |