



## Membership & Permission Form

Dear Parent,

We appreciate your interest in having your child participate in the Blazers Youth Running Club's program. Please complete the following information below which allows your child to participate in this free program. **Print Clearly.**

Name of Athlete: \_\_\_\_\_ Age: \_\_\_\_ Birth date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent(s)/Guardian(s) Name: \_\_\_\_\_

Cell phone (\_\_\_\_) \_\_\_\_-\_\_\_\_ Home Phone: (\_\_\_\_) \_\_\_\_-\_\_\_\_

Email: \_\_\_\_\_ 2<sup>nd</sup> Email: \_\_\_\_\_

Address: \_\_\_\_\_

### Emergency Contact Information:

Name: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Relation: \_\_\_\_\_

Your signature below gives your child permission to participate in the Blazers Youth Running Club's program (BYRC):

### **WAIVER AND RELEASE FROM LIABILITY AND INDEMNITY AGREEMENT**

In consideration of your acceptance to this application, the undersigned for himself/herself and personal representatives, assigns, heir next of kin, hereby agree as follows:

1. Undersigned WAIVES and RELEASES any and all claims, rights, and or causes of action which undersigned now has or may have against the BYRC, its respective officers, coaches and members, City of Chula Vista, City of San Diego, City of Bonita, and surrounding cities FOR ANY AND ALL CLAIMS, SUITS, LIABILITY, INJURIES, INCLUDING LOSSES AND DAMAGES, which may occur to or be inflicted upon undersigned or his/her property, including but not limited to those which relate to, or which may in any way be caused by the negligence of BYRC, its' respective officers, coaches, and members, while the undersigned is participating in and/or in route to any or from any BYRC.
2. Undersigned INDEMNIFIES AND HOLDS HARMLESS BYRC, its respective officers, coaches, members, City of Chula Vista, City of San Diego, City of Bonita and surrounding cities, FROM ANY AND ALL CLAIMS, SUITS, LIABILITY, INJURIES, LOSSES AND DAMAGES to the person or property of any individual or entity which arises by undersigned participation in BYRC events.
3. Undersigned VOLUNTARILY ASSUMES ALL RISKS of loss, damage or injury that may be sustained by undersigned while participating in any BYRC event.
4. Undersigned has been warned that he/she must be in good physical condition to participate in BYRC activities.
5. Undersigned has read this entire document, understands its contents, and voluntarily signs this Waiver and Release from Liability and Indemnity Agreement.

In agreement to the undersigned executes this document on DATE: \_\_\_\_\_

Signature: \_\_\_\_\_ (Parent or Legal Guardian)