



PRINCETON ATHLETIC CLUB

of Princeton, New Jersey, Inc.

MEMBERSHIP FORM

NAME: First _____ Last _____

ADDRESS _____ EMAIL ADDRESS _____

City _____ State _____ Zip _____ PHONE #'s: Home (_____) _____

SEX _____ AGE _____ BIRTHDATE: Month _____ Day _____ Year _____ Cell / Business (_____) _____

ADDITIONAL HOUSEHOLD MEMBERS

NAME: First: _____ Last: _____ SEX _____ AGE _____ BIRTHDATE: Month _____ Day _____ Year _____

NAME: First: _____ Last: _____ SEX _____ AGE _____ BIRTHDATE: Month _____ Day _____ Year _____

NAME: First: _____ Last: _____ SEX _____ AGE _____ BIRTHDATE: Month _____ Day _____ Year _____

NAME: First: _____ Last: _____ SEX _____ AGE _____ BIRTHDATE: Month _____ Day _____ Year _____

If any additional family members, please attach a sheet giving first and last names, sex, age, and birthdates.

Optional: Please indicate club jersey size(s). (chest measurement). Jerseys available with next group order.	Men	<input type="checkbox"/> XS (34)	<input type="checkbox"/> S (36)	<input type="checkbox"/> M (40)	<input type="checkbox"/> L (43)	<input type="checkbox"/> XL (47)
	Women	<input type="checkbox"/> XS (31)	<input type="checkbox"/> S (33)	<input type="checkbox"/> M (35)	<input type="checkbox"/> L (38)	<input type="checkbox"/> XL (42)

Fees:	
Individual membership \$15	
Additional adults ___ x \$10	
U19 dependents, all for \$5	
Jerseys ___ x \$45	
Donation (tax deductible)	
Total	

I would like to volunteer for: (Check all that apply)	My running interests are:
<input type="checkbox"/> Website / Newsletter	
<input type="checkbox"/> Race organization	
<input type="checkbox"/> Social	
<input type="checkbox"/> Membership development	
<input type="checkbox"/> Other:	

Send your completed form and a check payable to "P A C" to Ginny Macaluso, 10 Monterey Drive, Princeton Junction, NJ 08550, Or -- visit our membership form at www.princetonac.org

Any questions contact Ginny – membership@princetonac.org

Waiver: I know that running and volunteering to work in club races and other events 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 the decisions of a race official relative to my ability to safely complete the run. I assume all risks associated with running and volunteering to work a race including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and humidity, the conditions of the road and traffic on the road, all such risks being known and appreciated by me. I understand that wearing the colors of Princeton Athletic Club of Princeton, New Jersey, Inc. does not impart powers of flight or invisibility to the wearer. 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 of America, USAT&F, USAT&F-NJ, Princeton Athletic Club of Princeton, New Jersey, Inc, and all sponsors, their representatives, directors and officers, 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. I grant permission to all of the foregoing to use any photographs, motion pictures, recording, or any other records of these events for any purpose. I understand that failure to sign this waiver may affect my status as an official Princeton Athletic Club of Princeton, New Jersey, Inc. member.

Signature _____ Date _____

Signature _____ Date _____

(All adults please sign. Parent or guardian signs for children, authorizes emergency medical treatment.)

www.princetonac.org