



SHORE ATHLETIC CLUB OF NEW JERSEY
“Promoting the Olympic Sport of Track and Field Since 1934”
 Member of USA Track & Field /New Jersey
 and The Road Runners Club of America
 www.shoreac.org



MEMBERSHIP APPLICATION

(PLEASE PRINT) Today's Date _____ New ___ Renew ___

NAME _____

STREET _____

CITY _____ STATE _____ ZIP _____

TELEPHONE () _____ GENDER: MALE _____ FEMALE _____

AGE: _____ BIRTH DATE: _____ E-MAIL ADDRESS _____

PLEASE CHECK OFF:

Areas of Interest:

- Men's Team: **FEES**
- Women's Team:
- Youth: **\$ 5.00 (18 AND UNDER)**
- Masters Team **\$ 15.00 (INDIVIDUAL)**
- Road Racing: **\$ 40.00 (THREE YEARS)**
- Track Events **\$1000.00 (Lifetime)**
- Field Events: **Amount Enclosed: ____**
- Race Walking:
- Alumni Division

Volunteering For:

Officiating:

Races:

Banquet:

Newsletter:

**Make checks payable to:
SHORE ATHLETIC CLUB**

**Mail to: Shore AC Membership
 c/o Mr. Walter MacGowan
 1401 Third Avenue
 Spring Lake, NJ 07762**

I know that running and volunteering to work in club races 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 any decision 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 races including, but not limited to, falls, contact with other participants, the effects of weather, including high heat and or humidity, the conditions of the road and traffic on the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for membership of myself and anyone entitled to act on my behalf, waiver and release the Road Runners Club of America, USAT&F, USAT&F-NJ, The Shore Athletic Club of N. J. and all sponsors, their representatives 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 this events for any innate purpose, I understand the failure to sign this waiver may affect my status as an official Shore Athletic Club Member.

SIGNATURE _____ DATE _____

PARENT SIGNATURE (if under 18) _____ DATE _____