2021 Capital Striders Waiver of Participation January – December 2021

Name		_ Age	_ Gender M / F	
Address	City	Zi	ïp	
Phone	E-mail address _			
Please add me to the weekly upda	ate emails which include ma	aps, tips and oth	ner information	
Are you currently a Capital Strider	rs member?	No,	, but send me information!	
Would you be willing to volunteer?	?training run water s	stop oth	er Capital Striders events	
I agree that I, [your name] know that running in and volunteering for organized group runs, social events, and races associate with the Capital Striders Running Club are potentially hazardous activities, which could cause injury or death. I will not 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 associated with the club and am in good health, and I am properly trained. I agree to abide by all rules established by 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, physical contact with other participants/members, volunteers, race personnel, contract service providers, employees, and spectators including the potential contraction of a communicable disease resulting from contact with other participants/members, volunteers, race personnel, contract service 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 terrain. I understand that bicycles, skateboards, baby joggers/strollers, animals, and personal music players are discouraged in club organized runs or events, and I will abide by all rules of the club for the safety of others around me.				
-	sease (COVID-19) and I att		lations for the prevention of the spr ad the Capital Striders guidance at	
Having read this waiver and knowing these facts I, for myself and anyone entitled to act on my behalf, waive and release the Capital Striders Running Club, Capital Square, Drake University, Fitness Sports Ltd., The Drake Relays, the Cities of Des Moines, West Des Moines, Clive, Urbandale, Johnston and Windsor Heights, Polk County, 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 fore the club for any legitimate purpose cancellations of services, and by s activities including events are can	es. I understand that the cli signing this waiver, I conser	ub does not pro		d of
Signature:	Dat	te:	 	
Parent's Signature if under 18 year	ars:			