



MEMBERSHIP APPLICATION

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Phone: _____

Email: _____

Birth Date: _____

2009 DUES

Individual \$25.00 _____

Family \$35.00 _____

Student \$15.00 _____

List additional family members below

WAIVER

I hereby waive and disclaim for myself, my heirs and assigns any claims for personal injury or property damage which may occur in connection with any Naples Area Triathletes club activity. I will be completely responsible for myself, my family and any minor under 18 years of age whom I may bring or allow to participate in a club activity, including travel to and from club functions. I know that participating and volunteering to work at club events are potentially hazardous activities. I should not participate in club activities unless I am medically able and properly trained. I assume All risks associated with participating and volunteering to work at club events including, but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the conditions of the road and traffic on the course, 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, I, for myself and anyone entitled to act on my behalf, waive and release the USA Triathlon, the Naples Area Triathletes and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities even though that liability may rise out of negligence or carelessness on the part of the persons names in the waiver.

Signature: _____ Date: _____

(If under 18, parent or guardian. Waiver must be signed for member to be accepted)

Make checks payable to: Naples Area Triathletes, Inc.
Mail To: Naples Area Triathletes
5630 Yahl Street
Suite 3
Naples, FL 34109