



# 2009 RUN MANITOBA MEMBERSHIP

Name (Last) \_\_\_\_\_ (First) \_\_\_\_\_

Address: \_\_\_\_\_ City/Town \_\_\_\_\_

Postal Code: \_\_\_\_\_ Phone: (H) \_\_\_\_\_ (B) \_\_\_\_\_

Email: \_\_\_\_\_ (hotmail accounts have restrictions and may not receive all documents)

Place of Employment/School: \_\_\_\_\_ Position/Degree: \_\_\_\_\_

**Cash, cheque, Visa or Mastercard accepted for payment. Please make cheques payable to Athletics Manitoba.**

Name	Gender (M/F)	Date of Birth (day/month/year)	Membership Fee	Membership #
1 <sup>st</sup> Family Member			\$25.00	
2 <sup>nd</sup> Family Member			\$5.00	
3 <sup>rd</sup> Family Member			\$5.00	
4 <sup>th</sup> Family Member			\$5.00	
5 <sup>th</sup> Family Member			\$5.00	
6 <sup>th</sup> Family Member			\$5.00	
All fees are non-refundable		Total		
Payment Method:				

### Membership Benefits:

- Membership with Athletics Manitoba and Athletics Canada
- Full year accident insurance for racing and training
- Point accumulation in the Timex Road Race Series
- Eligibility for Provincial Championships and Teams
- Eligibility for awards, grants and funding programs

Your name and address information, including email, will be used to correspond with you regarding your memberships and to send you information about current and future Athletics Manitoba events. Athletics Manitoba may also contact you to conduct research and surveys in an effort to continually improve our programs and events. We also maintain and publish records of athletics and road running results. Your personal information will not be used for any other purpose without your consent. You may withdraw your consent to any further collection, use or disclosure of information about you at any time by giving us reasonable notice. From time to time Athletics Manitoba makes its contact information available to other carefully screened organizations (primarily sport organizations) that want to let you know about an event or service that might interest you. If you do not want your contact information to be made available to third parties, please check this box.

Athletics Manitoba Sport Safety/Acknowledgement of Risk (this statement is part of the application for membership).

The responsibility for sport safety must be shared by all. I, the undersigned, am aware that there is a certain risk of injury involved in my own or my child's participation in sport, either while traveling to or from the event or while attending or participating in the programs or activities of the events which are sanctioned/approved by Athletics Manitoba, its Divisions, its Member Clubs or recognized organizing societies. It is understood by me that the signing of this document is intended to indicate that on behalf of myself and/or my child, I assume the shared responsibility and acknowledge the risk of injury by so participating.

\_\_\_\_\_  
Applicant signature (MUST be signed)

\_\_\_\_\_  
Parent/Guardian signature – Required for all applicants under the age of 18