



## Tanglewood Running Club Sign-Up Form

Runner's Name: \_\_\_\_\_ Child's Age: \_\_\_\_\_ Homeroom Teacher: \_\_\_\_\_

Parent or Guardian Name(s) (if under 18): \_\_\_\_\_

Parent or Guardian Phone Number: Daytime \_\_\_\_\_ Nighttime: \_\_\_\_\_

### Emergency Contact Information:

Name: \_\_\_\_\_ Phone Number (s): \_\_\_\_\_

Relation: \_\_\_\_\_

Any Medical Concerns that we need to be aware of? \_\_\_\_\_

### Personal Goals:

### Waiver:

I know that running or walking during the Tanglewood Running Club (TRC) practice or road race is a potentially dangerous activity. I assume all risks associated with running or walking while participating with TRC, including but not limited to: falls, contact with other participants, the effects of weather including high heat and/or humidity, cold, traffic and conditions of the road/park trails, all known risks being known and appreciated by me. Having read this waiver, and knowing these facts in consideration of you accepting this form, I for myself and anyone entitled to act on my behalf, waive and release TRC Coaches, TRC Volunteers, Tanglewood PTA, Fort Worth Independent School District, Run-On Fort Worth, and the City of Fort Worth their representatives and successors from all claims or liabilities of any kind arising out of my participation with the TRC.

Signature (parent or guardian if under 18) \_\_\_\_\_

Date \_\_\_\_\_

PLEASE MAKE ALL CHECKS OUT TO "TANGLEWOOD PTA - RUNNING CLUB"

\_\_\_\_\_ FOR TRC USE ONLY \_\_\_\_\_

PAID: CASH CHECK Check No. \_\_\_\_\_