

proof of membership  
**Felder-Syracuse**  
usatf # 0035

**names**

2011

PO Box 11417, Syracuse 13218-1417 637-3829 [www.felderstadium.com](http://www.felderstadium.com)

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membership, \$10 per year per family, \$5 per person  
FREE for volunteers  
This membership form and fee shall be filed with Treasurer.

**Felder-Syracuse**  
a 501c3 organization  
**usatf#0035**

**MEMBERSHIP/VOLUNTEER WAIVER and RELEASE:** As member of **Felder-Syracuse, Inc.**, I hereby release any and all rights and claims for damages I may have against **Felder-Syracuse Track and Field, USATF, USATF-Niagara District, Syracuse Parks, Syracuse City School District employees, agents, officers of same, sponsors, other members and volunteers, their representatives, successors and assignees** for any and all injuries suffered by me in any organization event or as a result of my travel to and from any event.

I attest and certify that I am physically fit and have sufficient training for any and all organization activities I may undertake.

I grant permission to the Directors and Officers to use photos, movies, and/or other images of myself while participating in **Felder-Syracuse Track and Field** activities.

please print name \_\_\_\_\_

\_\_\_\_\_ age \_\_\_\_\_

Signature

As parent or legal guardian of the minor person named above, I agree to the waiver and release stated above. I will accept responsibility for said person's conduct and safe behavior while he/she participates in **Felder-Syracuse Track and Field** activities.

\_\_\_\_\_  
Parent/Guardian of said minors under age 18

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address, number, street, city, state, zip

\_\_\_\_\_  
e-mail

\_\_\_\_\_  
telephone

family (first names \_\_\_\_\_  
and ages of \_\_\_\_\_  
children) \_\_\_\_\_

for office use  
date \_\_\_\_\_  
am't \_\_\_\_\_

2011

