

This is a fillable form. Use the tab key to move from field to field.

Racewalk West Annual Membership Application

Name: _____

Mailing Address: _____

Contact Phone: _____

Fax Phone: _____

Email Address: _____

Birth Date: _____

Are you currently a member of BC Athletics? No Yes: BCA# _____

Are you currently a member of Canadian Masters? No Yes: CMAA# _____

To assist us in developing our program to meet the needs of our members please answer the following questions:

What is your current level of fitness?

Coach potato Below average Average Above Average Monster

In which of the following areas can you assist the club?

Event volunteer Officiating Race Organiser Club executive
Social co-ordinator Doing what I'm told

Are you interested in participating in Racewalk events?

Yes No

What is your estimated time to walk the following distance?

100m _____ 1.5k _____ 3k _____ 5k _____ 10k _____ 20k _____

What are your fitness goals this year? _____

How did you hear about us? _____

I, the undersigned, am aware that there is a certain risk of injury involved in my own participation in sport; either while travelling to or from an event; or while attending or participating in the programs or activities which are part of Racewalk West. I understand that the signing of this membership application is intended to indicate that on behalf of myself I assume the responsibility and acknowledge the risk of injury by so participating.

Signed: _____ Date: _____

Annual fee: under 35 years \$35 over 35 years \$50