



**The Mission of the Ridge Rider Athletic Club is to promote health, wellness & fitness in Northeast Arkansas.**

**www.ridgerider.org**

### **Ridge Rider Athletic Club Membership**

- You can join the RRAC online at [www.ridgerider.org](http://www.ridgerider.org) and follow the links to “join the RRAC” or you can complete this form and mail it in.
- RRAC Club Meetings are at 6:00 p.m. on the second Tuesday of every month. Check the website for the current topic and location of meetings.
- Each adult in the family must fill out and sign membership application. Applicants under the age of 18 must obtain the signature of a parent or guardian on this form.

Membership dues: 1 year individual \$15.00                      1 year family                      \$20.00

Please make check to RRAC and Mail to:  
RRAC • P.O. Box 2432 • State University, AR 72467

### **Application**

Gender: \_\_\_\_\_ Birthdate \_\_\_\_\_

Circle T-shirt size:    S        M        L        XL        XXL

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

Phone: (\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_

### **Agreement**

(Please Read Carefully)

For and in consideration of the acceptance of my application for membership in the Ridge Rider Athletic Club, I hereby waive, release, and discharge in advance the Ridge Rider Athletic club, its officers, members, and persons acting in concert with them (all of whom are referred to herein as RRAC), from any and all claims which may hereafter accrue to me, or to any other person (s) as a result of my participation in any event involving RRAC.

I represent that I am in good physical condition, and that I have sufficient skill and experience to safely complete any athletic endeavor in which I choose to participate. I realize that in participating in physical activities there is the possibility of accidental or other physical injury and that property damage and serious injury can occur as a result. Knowing the risks, I agree to assume the risks, agree to release, hold harmless, and to indemnify RRAC from any and all liability by myself or any third party as a result of my participation in any RRAC event. I agree that the undertakings set forth in the preceding paragraphs shall remain in force and effect until I cease to be a member of RRAC.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_