



Membership

Application

Calendar Year 2026: Family \$20, Individual \$15, Full time Student \$10, Seniors 65+ \$10

Membership Fees are fixed priced for the calendar year and are NOT prorated if joined/renewed during the calendar year.

Member Benefits: Registration Discounts for RCRWC Races - Email & Text Race Notifications - Scholarships for eligible RCRWC Student Members - GNC, South Parkersburg, 10% Discount - Renee's Birkenstock 15% on athletic footwear and athletic clothing - Tradehome Shoes, Grand Central Mall, Discount 10%

Name / _____ / _____ / _____

Date of Birth M/D/Y

Email _____

PHONE - Is this a Cell? Circle Yes / No

Address / _____ / _____ / _____
City _____ State _____ Zip Code _____

ALL MEMBERS MUST READ AND SIGN THIS WAIVER I know that running and volunteering to work in club races and related activities are potentially hazardous activities. I should not enter in club activities unless I am medically able and properly trained. I agree to abide by any decision of a club official relative to my ability to safely complete the event. I assume all risks associated with running, any club-related activities, and volunteering to work in club events, including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, the condition of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my application for membership, I for myself and anyone entitled to act on my behalf, waive and release the RRCA, the River City Runners & Walkers Club and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in these club activities even though that liability may arise out of negligence or carelessness on the part of the persons named in the waiver.

Signature (Parent/Guardian, if under 18) _____ Date _____

Additional Family Members

Name / _____ / _____ / _____

Signature (Parent/Guardian if under 18) _____ Date of Birth _____

Name / _____ / _____ / _____

Signature (Parent/Guardian if under 18) _____ Date of Birth _____

Name / _____ / _____ / _____

Signature (Parent/Guardian if under 18) _____ Date of Birth _____

TOTAL AMOUNT ENCLOSED: \$ _____ Membership Level (Circle One): Family/Indiv/Student/Senior

Mail completed and signed Application form with payment to:

River City Runners & Walkers Club

PO Box 4496

Parkersburg, WV 26104

ON-LINE Membership - use URL or QR Code below

<http://runsignup.com/Club/WV/Parkersburg/RiverCityRunnersandWalkersClub2>

Log into your Runsignup account and select Membership Level.
New users need to create a Runsignup account - it's free – then
select Membership Level and follow instructions and payment.

