



2019 Mileage Challenge Application Fulmont Roadrunners Club

Name _____

Street _____

City, State, Zip Code _____

Phone _____ Email _____

Mileage Goal for 2019 (Check one):

250 miles 500 miles 750 miles 1000 miles 1250 miles

1500 miles 1750 miles 2000 miles Other (specify miles) _____

Calendar sheets for recording mileage may be downloaded from the club website – www.fmrrc.org/mileage.html

In consideration for the opportunity to participate in the 2019 FMRRC Mileage Challenge, I hereby remiss, release, and hereby discharge the Fulmont Roadrunners Club (FMRRC), and any and all persons staffing this event from all claims and liabilities of any kind arising from my participation. I certify that my physical condition is good and that I am fit to participate in this year-long event.

Signature _____ Date _____

Parent or guardian signature if under 18 _____

Send completed form to: Doris Castle
2189 Hickory Hill Road
Fonda, NY 12068

Email to: Doris.Castle@fmrrc.org

Open to FMRRC members only