



RUNNER

TRIATHLETE NEWS

CLUB SUBSCRIPTION FORM

CLUB INFO:

Club Name _____

Authorized Club Representative Signature _____

SUBSCRIBER INFO:

Name _____

Address _____

City/State/Zip _____

Email _____ Phone _____

(Website password will be e-mailed to this address)

TERM: 1 year - \$9.00

PAYMENT: Check/Money Order

Credit Card *(fill in credit card information below)*

CREDIT CARD PAYMENT:

AMEX

VISA

MASTERCARD

DISCOVER

Card # _____ Expiration Date _____

Print Name _____

Signature _____