MARTY'S RUN 5K

OFFICIAL ENTRY FORM

Official Use Only

Put your ChampionChip number here and deduct $2.00 per box checked

Make checks payable to: 1st Place Sports Running Club

Mail to: 1st Place Sports Running Club, 3931 Baymeadows Road, Jacksonville, FL 32217

First Name

Last Name

Age on race day

Sex: M F

shirt size — Kids: L — Adult: S M L X

E-mail address for confirmation of entry received and for up to date information.

Street address

Include Apt. #

Check one: Run/Walk Roll

CITY

STATE

ZIPCODE

TELEPHONE NUMBER

indicate where you plan to pick up your race packet

Baymeadows Jax Beach Orange Park Day of race only

Method of Payment: Cash Check

$ Comp Entry

AMOUNT PAID WITH ENTRY

I know that running a road race is a potentially hazardous activity which could cause injury or death. I should not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, am in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running in this event, including but not limited to : falls, contact with other participants, the effects of the weather, including high heat and /or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, roller skates or blades are not allowed in the run/walk event. Animals and radio headsets are not allowed in the race. I also understand that I must return by ChampionChip transponder or I will be billed $30.00 as replacement cost. I also understand that if this event has to be canceled for any reason beyond the contol of race management that my entry fee will not be refunded. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I , for myself and anyone entitled to act on my behalf, waive and release the Organizers of this event and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Please sign here. (parent must sign if participant is under 18 years of age)

Date signed