



WHITBY INTERNATIONAL NORTH MARATHON REGISTRATION

ALL FEES NON-REFUNDABLE AND NON-TRANSFERABLE.



PAYMENT METHOD

Credit Card #: _____ Name on Credit Card: _____

Credit Card Expiry Date: _____ / _____

Visa Mastercard AMEX

Cheque enclosed

Please make cheques payable to:

WHITBY INTERNATIONAL NORTH MARATHON

MAIL TO: W-I-N MARATHON

P.O. Box 10058, 910 Dundas Street West

Whitby, Ontario L1P 1P7

May 22nd-23rd, 2010 - Whitby, Ontario					
EVENT	RACE FEE (by Feb 28)	RACE FEE (by Mar 28)	RACE FEE (by Apr 28)	RACE FEE (by May 20)	RACE FEE (at Expo)
<input type="radio"/> KIDS 1K	\$5	\$5	\$5	\$5	\$10
<input type="radio"/> 10KM RUN	\$35	\$40	\$45	\$50	\$60
<input type="radio"/> 10KM WALK	\$35	\$40	\$45	\$50	\$60
<input type="radio"/> HALF MARATHON	\$60	\$65	\$70	\$75	\$80
<input type="radio"/> HALF MARATHON WALK	\$60	\$65	\$70	\$75	\$80
<input type="radio"/> MARATHON	\$70	\$75	\$80	\$85	\$90
<input type="radio"/> MARATHON 2 PERSON RELAY	\$120	\$130	\$140	\$150	\$160

ATHLETE DETAILS

First & Last Name: _____

Email Address: *(Your receipt will be sent to this address)* _____

Phone # + Area Code: (____) - ____ - ____ Gender: Female Male Date of Birth: ____ / ____ / ____ Age on Race Day: ____

Street: _____

City: _____ Province/State: _____ Postal/Zip Code: _____

Pasta Dinner - \$25/person *(Saturday Evening)*: Yes No Qty: _____ Shirt Size: XS S M L XL

MARATHON PARTICIPANTS ONLY - Enter your weight, if you would like to participate as a Clydesdale (Male or Female): _____ lbs.

TEAM INFORMATION

Team Name: _____

Team Type: Open Female Open Male Mixed Gender: Female Male

Team Member First & Last Name: _____

HEALTH INFORMATION

Medications: _____ Weight: _____

Where did you hear about us? Flyer Facebook Internet Email Other: _____

RELEASE WAIVER AND INDEMNITY:
I know that participating in physical fitness events is a potentially hazardous activity. I agree not to participate unless I am medically able and properly prepared. I should not participate without my physician's approval. I agree to abide by any decision of an event official concerning my ability to safely participate. I assume any and all risks associated with the event; including but not limited to, falls, contact with other persons or objects, the effects of weather, traffic and course conditions. As a condition of my entering this event, I, for myself, any accompanying minors, and anyone entitled to act on my behalf, waive and release Online Registrations, any associated or related entities, their directors, officers, employees, agents, representatives, sponsors, volunteers, and organizers (herein collectively called "Event Organizers"), from present and future claims and all liabilities of any kind, known or unknown, arising out of my participation in this event or related activities, even though such claim or liability may arise out of negligence or fault on the part of the Event Organizers. I agree that the Event Organizers shall not be liable for any personal injury, death or property loss, and I release the Event Organizers and waive all claims with respect thereto. In the event my registration fees are paid, I agree to be bound by the provisions of this waiver. I grant permission to Event Organizers to use or authorize others to use my personal information, any photographs, motion pictures, or any other record of my participation in this event or related activities without remuneration. Applications for minors shall be accepted only with a parent's signature and should be signed by the minor.

I ATTEST AND VERIFY THAT I AM 18 YEARS OF AGE OR THAT I AM SIGNING AS THE LEGAL GUARDIAN ON BEHALF OF AN EVENT PARTICIPANT UNDER THE AGE OF 18 YEARS.

Agreeing to this waiver and registering for this event by me, for myself or as legal guardian of an event participant, authorizes you to accept this waiver as signed by me.

I have read and I agree to the waiver.

Signature

Parent/Guardian signature if participant is under 18 years of age

Date

Date