

Official Entry Form

Father's Day, Sunday June 18, 2006

To enter, complete this form, read and sign waiver and return with proper fee to the Manitoba Marathon, 200 Main Street, Winnipeg, MB, R3C 4M2

LAST NAME _____

FIRST NAME _____

RELAY TEAM NAME _____

EVENING PHONE _____

DAY PHONE _____

EMAIL ADDRESS _____

ADDRESS (Street & Number etc.) _____

CITY / PROVINCE / POSTAL CODE _____

DATE OF BIRTH M/D/Y _____

AM or MRA NUMBER _____

AGE ON 6/18/06 _____

MALE FEMALE

SCHOOL OR COMPANY (if applicable) _____

This is my: First Full Marathon
Or: I have run _____ Full Marathon(s) _____ Half Marathon(s) _____ PR _____

Release and Consent: I know and accept all the risks that may arise in running or walking in an organized event such as the Manitoba Marathon. I know that I must be medically able and fit to participate. I also know that I may encounter traffic on or next to the course route, high heat, humidity, and hazardous road and traffic conditions. Knowing these facts, I release the Manitoba Marathon, the City of Winnipeg and Winnipeg Police Services, the sponsors, the supporters and all individuals and organizations associated with the event. This release covers claims and liability for death, personal injury and property damage arising out of my participation no matter how caused or whether foreseen or not. I consent to medical treatment if I am injured or ill during the event. I permit the free use of my name and picture in the broadcasts, telecasts, and the press as they pertain to the Manitoba Marathon. I permit the event directors, the sponsors and the charity free use of my name, voice and picture in any broadcast, advertising, promotion or other account of the event. I consent to collection of the personal information on this form and to any photographs and video recordings of me during the event. The Manitoba Marathon may use the personal information to process my entry and record my results and to promote the event. The Manitoba Marathon may publish the results in the Winnipeg Free Press, in other local newspapers and post them on the corresponding web sites including <manitobamarathon.mb.ca>. You may also use my name, voice and picture in any broadcast, advertising, promotion or other account of the event. (A full copy of the Manitoba Marathon privacy statement describing its privacy practices and all uses and disclosures is available on our web site or from our office). I am at least 18 years old, I read this document, and I understand what it says. If I am under 18 years, the person who signs is my parent or guardian.

PARTICIPANT'S SIGNATURE _____

PARENT SIGNATURE (if under 18) _____

DATE THIS FORM FILLED IN M/D/Y _____

OFFICE USE ONLY

RELAY CATEGORIES

Instructions:

- Each relay team member must fill in and sign a form (5 in total)
- The first runner on a relay team who wishes to run the Full or Half Marathon must register for both events and must pay the fees associated with both events.
- School teams may have one adult on the team. The team will be in the school special category.
- Fill out one check box from each side of this form

Check ONE:

- A) Elementary Schools - Grades 6 & Under
 B) Junior High Schools - Grades 7 to 9
 C) High Schools - Grades 10 to 12
 D) Open - fellow workers, community centre pals, softball buddies or just plain friends

And Check ONE:

- 1) Male
 2) Female
 3) Mixed (at least 2 members of each sex)
 4) School Special (for teams including one teacher or parent)

	Until May 26/06	May 29-June 13		June 15, 16, 17	Total				
Manitoba Lotteries Full Marathon <input type="checkbox"/> Wheelchair Event T-shirt: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	Adult \$65	Youth \$35	Adult \$85	Youth \$50	\$125				
Intrepid Dezine Half Marathon <input type="checkbox"/> Wheelchair Event T-shirt: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	Adult \$55	Youth \$30	Adult \$75	Youth \$45	\$115				
Marathon Relay	Adult \$135	Youth \$60	Adult \$175	Youth \$75	N/A				
Free Press Walk <input type="checkbox"/> Wheelchair Event	Adult \$20	Youth \$14	Adult \$25	Youth \$18	\$50				
Great-West Life Super Run <input type="checkbox"/> Wheelchair Event	Adult \$20	Youth \$14	Adult \$25	Youth \$18	\$50				
Carb Dinner	Qty <input type="text"/>	Tickets @ \$40 each							
My Personal Donation	\$								
DO NOT SEND CASH THROUGH THE MAIL NO REFUNDS – NO EXCEPTIONS	AM or MRA members - Deduct \$2								
	TOTAL								
\$									

Method of Payment VISA MASTERCARD CHEQUE (enclose) CASH (in person only)

If paying by credit card please provide the following information:

Credit Card Account Number: _____

Card Expiry (M/Y) _____ / _____

Name (as it appears on credit card) _____

Why I am running in the Manitoba Marathon: _____