



Memorial Day Marathon Registration

May 26th -27th 2012

Tanglewood Music Center – Lenox, MA

Runner Information:

First Name: _____ Last Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone Number (Local number or cell number): _____

Email: _____ Sex: M F

DOB: _____ Age on Race Day: _____

Race Entry (circle one):

Marathon - \$85 Half Marathon - \$70 10K - \$35 5K - \$25 Kids Run - \$12

Trail Race - \$50

Trail-Road Challenge: Trail/Marathon - \$113.75 Trail/Half - \$102.50 Trail/10K - \$74.50 Trail/5K - \$67.50

Shirt Size (circle one): S M L XL

Please make checks payable to: Memorial Day Marathon

Please send checks to:
Memorial Day Marathon
21775 Philmont Court
Boca Raton, FL 33428

I am participating in the Memorial Day Marathon (MDM) at my own risk and waive all claims of every nature against the organizers, Running Away Inc., officials, sponsors, and any other participating agencies with respect to any personal loss, illness, bodily injury or death resulting from participating in these activities. I also fully understand the rigors of such competition and have prepared myself physically for the race. At the time of registration, I will inform the race organizers regarding any relevant medical condition. I agree to follow the rules which govern road racing. I, the undersigned, have read the above waiver and release, and understand that I have given up substantial rights or claims to both the MDM and Running Away Inc. by signing it, and sign it voluntarily.

Signature: _____ Parent / Guardian if under 18: _____

For Office Use:

Cash Received: \$ _____ Check # _____ Bib Number: _____