



**SUN VALLEY HALF MARATHON REGISTRATION**

**June 5, 2010**

**Please fill out form and waiver completely.**

**Entry Fees: \$40 – December 1 – May 31. \$60 – June 1 - 4. \$65 on race day.**

**Mail-in registration must be received no later than May 31, 2010. Email notification will be sent when registration is received. If you chose race day registration, please print this form and fill out prior to arrival on race morning. CASH/CHECK ONLY – NO CREDIT CARDS**

**Entry fees are Non-Refundable**

(Please Print)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: \_\_\_\_\_

Birth date: \_\_\_\_\_ Age on race Day: \_\_\_\_\_

Email: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Evening Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

T-Shirt Size: S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_

Who to notify in case of emergency: \_\_\_\_\_ Phone: \_\_\_\_\_

How did you hear about the Sun Valley Half Marathon: \_\_\_\_\_

If staying at a hotel/motel, which one and how many nights: \_\_\_\_\_

How did you travel to the Sun Valley Half Marathon: \_\_\_\_\_

Signature of participant: \_\_\_\_\_

Signature of parent / guardian if participant is under 18: \_\_\_\_\_

**Please make checks payable to: Sun Valley Half Marathon, Brad Mitchell**

**Mail to: Brad Mitchell, 1921 Winterhaven Dr. Hailey, Idaho 83333**

**PARTICIPANT WAIVER STATEMENT:**

I know that running a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to, falls, contact with other participants, vehicles at road crossings and on the course and the risk of running near these vehicles, other pedestrian traffic on the path system, the effects of the weather, including high heat, rain, snow, ice, and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. 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 Sun Valley Half Marathon, USA Track & Field, the City of Sun Valley, the City of Ketchum, Blaine County Recreation District, State of Idaho, all volunteers, all sponsors, their representatives and successors from any and all claims or liability for death, personal injury or property damage of any kind or nature whatsoever, foreseen or unforeseen, known or unknown 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. If as a result of my participation in the Sun Valley Half Marathon, I require medical attention, I hereby give my consent to authorize medical personnel of the event to provide such medical care as is deemed necessary by such authorized personnel. I grant permission to all of the foregoing to use photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Having read this participant waiver statement and understanding it to be a legally-binding release and indemnity agreement, participant signifies his/her assent to the above terms by signing below.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of parent / guardian required for participants under the age of 18.

Parent / Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent / Guardian Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

