

# 2010 Equinox Marathon & Relay Entry Form

Bib Number

**INSTRUCTIONS:** Please print legibly. **You must provide date of birth.**

Last Name	First Name	MI
Mailing Address		
City	State & Zip Code	Email
Phone	Sex <b>M</b> <b>F</b>	<b><u>Date of Birth</u></b>  /   /
	T-Shirt Preference <b>S</b> <b>M</b> <b>L</b> <b>XL</b>	
Emergency Phone	Note: shirt size subject to availability	

**COURSE TOUR** ---- 1:00 – 3:00 pm, Friday, September 17<sup>th</sup>. Meet at the Patty Center steps

Fee for course tour: \$10 per person ... please indicate number of course tour participants ....

Entry Fee is non-refundable	On or before September 7 <sup>th</sup> bib pickup	September 8 <sup>th</sup> through September 16 <sup>th</sup>	Friday, September 17 <sup>th</sup>	From 6:00-7:00am on race morning, Saturday September 18 <sup>th</sup>
<b>Race Fee</b>	<b>\$40</b>	<b>\$45</b>	<b>\$50</b>	<b>\$60</b>

- Make checks payable to "Equinox Marathon Fund." **Deduct \$5 from entry fee if RCN member!**
- Entries can be dropped off at Beaver Sports or Equinox Orthopedic Physical Therapy or they may be mailed to Steve Bainbridge, c/o Running Club North, P.O. Box 84237, Fairbanks, AK 99708. Mail-in entries must be postmarked by Sept. 7<sup>th</sup>
- Registration available on-line at <http://www.active.com>

Race entrants, by signing this entry form, give permission to have their photograph or videotape image used in printed and electronic publications, or video broadcasts, or any similar electronic means. Race entrants also give their permission to have medical information transmitted by emergency response personnel on race day.

## RISK WAIVER

I, the undersigned, know that the Equinox Marathon and Relay are events which carry the risk of personal injury. I know that there are natural and man-made obstacles and hazards, surface and environmental conditions and risks, which in combination with my actions can cause severe or even fatal injury. I also know that there will be traffic on the course route, and I assume the risk of running in traffic. I agree that I, as a participant, must take an active role in understanding and accepting these risks, conditions and hazards, and in the event the race is canceled or postponed, I am responsible for any costs I have incurred to attend the race, including travel expenses. I also agree that I, and not the race officials or the volunteers, the University of Alaska, the Alaska Railroad Corporation, the State of Alaska, Running Club North, RRCA or other sponsors of the events, am responsible for my safety while I participate or train for these events. This waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown.

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

Parent Signature (for entrants under 21 yrs. old) \_\_\_\_\_ Date: \_\_\_\_\_

## For Relay Teams:

Relay Team Name: \_\_\_\_\_ [leg # \_\_\_\_\_]

Relay partners [specify leg #] \_\_\_\_\_ leg # \_\_\_\_\_ & \_\_\_\_\_ leg # \_\_\_\_\_

- Each relay team member must complete a separate entry form and pay an entry fee.