



morsemini

Morse Mini Marathon and 5K Official Entry Form

Register online at www.morsemini.com

FIRST NAME _____ LAST NAME _____ Male / Female
GENDER (circle one)

STREET ADDRESS _____ CITY _____ STATE _____ ZIP _____

EMAIL (IMPORTANT TO GET ALL RACE UPDATES) _____

BIRTHDAY MONTH / DAY / YEAR _____ AGE ON: 09/04/2010

DAYTIME PHONE _____ EVENING PHONE _____

T-SHIRT SIZE: (check one) S M L XL XXL EVENT: (check one) HALF MARATHON 5K RUN/WALK
*Participants who register after August 18 are not guaranteed a t-shirt

RACE DAY EMERGENCY CONTACT FIRST NAME _____ RACE DAY EMERGENCY CONTACT LAST NAME _____ RACE DAY EMERGENCY CONTACT PHONE _____

Race Fees		
✓ ONE	DESCRIPTION	AMOUNT
	Early Half Marathon Entry (Postmarked by 06/17/10)	\$45.00
	Regular Half Marathon Entry (Postmarked by 08/28/10)	\$55.00
	Early 5K Entry (Postmarked by 06/17/10)	\$25.00
	Regular 5K Entry (Postmarked by 08/28/10)	\$30.00
	Race registration will close once the limit of 5,000 participants is met.	

WAIVER & RELEASE FROM LIABILITY

As a participant in the Morse Mini Marathon 5K Walk/Run, I verify that I have read, understand, and accept the terms of this waiver and release. My submission of this form shall act as my legal signature. I understand the nature of this event and the risks involved in participating in this event. I know that running and walking a road race is a potentially hazardous activity. I understand that I should not participate unless I am medically able and sufficiently trained to do so. I agree to abide by any decision of any race official concerning my ability to safely complete this event. I understand that while police protection will be provided, there may still be traffic on the course. I assume all risks associated with my voluntary participation in this event, including, but not limited to, traffic and other conditions of the road, falls, contact with other participants, and the effects of the weather, including extreme temperatures and precipitation. Knowing these facts, for, and in consideration of, my participation in this race, I, for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf, covenant not to sue and fully release and discharge Morse Mini and Husky Champion Club, the Cities of Arcadia and Cicero, Hamilton Heights Schools, Hamilton County, the Hamilton County Sheriff Dept. Arcadia Police Dept. Cicero Police Dept., and any and all officers, directors, employees and other representatives of the foregoing, and any successors or assigns of the foregoing, and hold and them harmless from and against ANY AND ALL actions, claims, injuries, demands, liabilities, loss, damage, or expenses, including but not limited to death, personal injury, and property damage, whether foreseen or unforeseen, arising out of, or in the course of, my participation in this event. The above has been read by all participants and by signing this entry form I understand and agree with all terms of the waiver statement.

PAYMENT: (check one) Check Enclosed MasterCard VISA

ACCOUNT NUMBER: _____

SECURITY CODE: _____ EXPIRATION: ____ / ____

SIGNATURE: _____

SIGNATURE OF PARTICIPANT DATE

SIGNATURE OF PARENT (If participant is under 18 years of age) DATE

COMPLETE AND RETURN THIS ENTRY FORM, ALONG WITH PAYMENT (include check payable to Husky Champion Club or Credit Card information and mail to: Morse Mini P.O. Box 133 Arcadia, Indiana 46030. Online information and registration available at www.morsemini.com.)

Only one participant per application. Application may be photocopied. A fee of \$25 will be charged for all returned checks. Race-Day registrations will be accepted until 7:00 am, September 4th.