

2019 WHITEFISH POINT MARATHON REGISTRATION

June 8, 2019



Participant Information - Please PRINT clearly

First Name _____ **Last Name** _____

Gender Male _____ Female _____ **Date of Birth** _____ **Age on Race Day** _____

Email Address _____ **Phone** _____

Address _____ **City** _____ **State** _____ **ZIP Code** _____

Emergency Contact Name _____ **Relationship** _____ **Phone** _____

Please list any medical/health concerns on the back of this form.

T-Shirt Size (Unisex) (Please Circle) Small Medium Large X-Large

How did you hear about this event? _____

Is this your first marathon? (Please Circle) Yes No



Registration Fee: By January 31, \$40.00; February 1 to April 30, \$50; May 1 to June 3, \$60 \$ _____

\$5.00 Discount available to members of UPRRC, 50 & DC Marathon Group, 50 States Marathon Club, Marathon Maniacs | Only one membership discount may be applied. Please include appropriate verification with mail in form.



Discount (Indicate Membership) _____ \$ _____

Total Enclosed: (checks payable to Paradise Area Chamber of Commerce or PACC) \$ _____



Mail to Whitefish Point Marathon, PACC, PO Box 82, Paradise, MI 49768

NOTE: online registration is available at Active.com and closes on Wednesday, June 5 at 11:59 PM (Late Registration on Friday, June 7 at packet pickup, \$60.00, no membership discounts, T-shirt not guaranteed)



2019 WHITEFISH POINT MARATHON RELEASE

I know that running a road race is a potentially hazardous activity that might cause personal injury or even death. I attest and verify that I am medically able and properly trained to enter and to complete this event. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all the risks associated with running in this event including, but not limited to falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic conditions of the road/bridges, all such risks being known and appreciated by me. In consideration of the Whitefish Point Marathon, its sponsors, agents, servants, representatives, licensees, contractors, successors, and assigns organizing and conducting the Whitefish Point Marathon (Road Race) held on June 8, 2019, and allowing me to participate and run in said race. I hereby waive, release and discharge forever said Whitefish Point Marathon and its sponsors, agents, servants, representatives, licensees, contractors, successors, and assigns from any and all claims, demands, rights and causes of action of whatsoever kind and nature arising, directly or indirectly, from any and all known and unknown, foreseen and unforeseen, bodily and personal injury, damage to property, and the consequences thereof resulting from my running and/or participating said Road Race, and Covenant Not to Sue for any said injuries and/or damage. I understand all entries are final, with no refunds, and that the race organizers reserve the right in the event of an emergency or local or national disaster to cancel the race or to change the day and/or time of the event and that there is no refund of entry fees. I give permission for the use of name and/or picture for any broadcast, telecast or other account of this event.

SIGNATURE _____ **Date** _____

All forms must be signed. Incomplete, unsigned forms will not be accepted.

Event Coordinator Use: Date Received _____ Fees Enclosed _____ Bib Number _____

Whitefish Point Marathon is another event sponsored by the Paradise Area Chamber of Commerce