2010 Registration Form
Register online and save!

U.S. AIR FORCE

United States Air Force Marathon
September 18, 2010

1 CHECK THE EVENT YOU ARE ENTERING ☐ 5K (Sept. 17, 2010)

LAST NAME 2 | SUFFIX | FIRST NAME 3 | M.I.

STREET ADDRESS/APARTMENT NUMBER 4

CITY 5 | STATE/PROVINCE 6

ZIP/POSTAL CODE 7 | WHEELED MARATHON DIVISION (CHECK ONE) 8 ☐ WHEELED HANDCRANK ☐ WHEELED PUSH RIM | WHEELED 5K DIVISION (CHECK ONE) 9 ☐ WHEELED HANDCRANK ☐ WHEELED PUSH RIM

SEX M/F 10 | DATE OF BIRTH 11 / / | AGE (ON 9/18/2010) 12 | IS THIS YOUR FIRST MARATHON? 13 ☐Yes ☐No | PREVIOUS AIR FORCE MARATHONS 14 | RACE PERSONAL RECORD 15

DAYTIME TELEPHONE NUMBER 16 - - | EVENING TELEPHONE NUMBER 17 - - | E-MAIL ADDRESS (PLEASE PRINT) 18

19 AIR FORCE MARATHON GUEST ENTRY FEES

	Postmarked by August 31, 2010	EXPO Registration	Amount Enclosed
5K	$30	$35	
Pasta Dinner Adult	#	@ $25 each	
Pasta Dinner Child (4-10)	#	@ $ each	
Pasta Dinner Child (8 & Under)	#	@ $ each	$0.00
Total Amount Enclosed			

SOLD OUT

20 T-SHIRT SIZE (CIRCLE ONE)

5K

S M L XL XXL

21 WAIVER - REQUIRED

In consideration for your accepting my or my child's entry in the United States Air Force Marathon and associated races (including but not limited to the full marathon, the half-marathon, the 10K, the 5K, and the wheelchair races), I, the undersigned, intending to be legally bound, waive and release for myself or my child, my heirs, executor and administrators, any and all rights and claims for damages, demands and any other actions that have resulted from my or my child's participation in the event, which I may have against the United States Air Force, the US Government, the City of Fairborn, Wright State University, Greene County, Montgomery County, MarathonGuide.com/Web Marketing Associates, volunteer medical support, all participating supports and those entities representatives, successors and assignees. I agree to hold these entities, and their agents, representatives, successors, and assignees harmless from any liability including any and all injuries, to include death, that are suffered by me as a result of my participation in this event.

I verify I have full knowledge of the rigors of this race and the risk involved in participation, and I am physically fit and have sufficiently trained to complete this event. I realize medical support for this event will consist primarily of volunteer medical personnel prepared to administer first-aid type assistance along the race course and finish line.

I acknowledge that MarathonGuide.com/Web Marketing Associates has no responsibility for the operation of the USAF Marathon and associated races and is only acting as an agent to register applicants who wish to participate in the USAF Marathon and associated races and as such does not verify the accuracy and completeness of the information that is provided by the event operators or sponsors.

I hereby grant permission to the United States Air Force Marathon and its sponsors to use all information submitted in my or my child's application, and any photograph, videotape, motion pictures, recording and any other record of this event including pre-race and post-race publicity.

The registrant agrees to hold MarathonGuide.com/Web Marketing Associates and its agents harmless from any liability or injury resulting from the USAF Marathon and associated races. Furthermore, the registrant agrees that it shall have no claim against MarathonGuide.com/Web Marketing Associates for any injury that may occur during the USAF Marathon and associated races. I understand all confirmed orders are final once payment is submitted. MarathonGuide.com/Web Marketing Associates does not issue refunds.

X _____
SIGNATURE OF PARTICIPANT DATE

X _____
SIGNATURE OF PARENT OR LEGAL GUARDIAN - FOR PARTICIPANTS UNDER 18 YEARS OF AGE DATE

WAIVER MUST BE SIGNED TO BE PROCESSED

22 STATUS

☐ ACTIVE DUTY MILITARY (Circle branch of service)
USAF USA USN USMC USCG

☐ CIVILIAN (Non military) ☐ RETIRED MILITARY

☐ RESERVE ☐ MILITARY SPOUSE/ DEPENDENT

☐ NATIONAL GUARD ☐ FOREIGN MILITARY

MIL RANK/GRADE _____ MAJOR CMD _____

BASE/POST _____

Mail completed entry form with fee payable by check or money order to:

USAF Marathon
88 ABW/CVM
5030 Patterson Pkwy, Bldg. 219
Wright-Patterson AFB, OH 45433-5319

REGISTRATION FEE IS NON-REFUNDABLE AND NON-TRANSERABLE

For more information call 1-800-467-1823 or visit our web site www.usafmarathon.com