American River Parkway Half Marathon and 5K
2012 Race Registration Form

RACE CATEGORY: RUNNERS' HALF MARATHON ☐ WALKERS' HALF MARATHON ☐ 5K ☐

LAST NAME _____ FIRST NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

AGE (on race day) _____ GENDER: FEMALE ☐ MALE ☐ **EMAIL** (Important to include so we can communicate pre-race details) _____

T SHIRTS: Please circle appropriate gender and size.

NOTE: PLEASE REVIEW THE SHIRT SIZING PAGE ON THE WEBSITE PRIOR TO SELECTING. THIS WILL ENSURE YOU GET THE CORRECT SIZE.

WOMEN'S: XS S M L XL XXL XXXL

MEN'S: S M L XL XXL XXXL

IMPORTANT: To guarantee your shirt size, entry form must be received by March 19, 2012

RACE ENTRY FEE:

HALF MARATHON -	$45 until March 19;	$55 from March 20 – April 21;	$70 In-person after April 21, if race not full
5K -	$25 until March 19;	$30 from March 20 – April 21;	$35 In-person after April 21, if race not full

MAKE CHECKS PAYABLE TO:
SACFIT – PARKWAY HALF MARATHON

SORRY, NO REFUNDS

MAIL TO:
PARKWAY HALF MARATHON
5523A F STREET, SUITE 300
SACRAMENTO, CA 95819

RACE is APRIL 28, 2012 at WILLIAM POND PARK Walkers Start: 7:15AM / Runners Start 7:45AM / 5K 8AM

Waiver and Signature: In consideration of your accepting my entry, I, intending to be legally bound, do hereby for myself and my heirs, executors, administrators waive and release any and all rights and claims for damages I may accrue against the persons and organizations affiliated with the race including but not limited to American River Parkway Half Marathon, SacFit, Capital Road Race Management, American River Parkway Foundation, City and County of Sacramento, all sponsors, volunteers, marathon staff, subcontractors, agents, attorneys, and representatives for any and all injuries that I may suffer while participating in the Marathon or any of its allied or accompanying events, or en route to and from the events. I consent to the use of my image in photos, videos and audio recording and film, of my participation in all Marathon events. I attest that I am physically fit and sufficiently trained for this competition, my physical condition verified by a licensed M.D. during the last 6 months. As part of the waiver, I acknowledge that I have read and understand all of the above.

_____ _____
Signature of Applicant Date
(Half Marathon applicants must be 13 years of age)

_____ _____
Parent/Guardian Signature for all participants Under 18 years of age Date