



# ENTRY FORM 2nd Annual MADISON MINI-MARATHON

SATURDAY, AUGUST 21, 2010 • 7:00 AM • MADISON, WISCONSIN

NO REFUNDS OR TRANSFERS. ONE PARTICIPANT PER FORM. ENTRY FORMS MAY BE PHOTOCOPIED.

## HALF MARATHON ENTRY FEES

No refunds or transfers. Reassignment or selling of registration is not permitted.

Thru Wednesday, July 14, 2010	\$50	\$
Thursday, July 15, 2010 - Wednesday, August 18, 2010*	\$60	\$
At packet pick-up only - Friday, August 20, 2010	\$75	\$

\*(paper applications must be postmarked by Friday, August 13, 2010)

## 5K ENTRY FEES

No refunds or transfers. Reassignment or selling of registration is not permitted.

Thru Friday, July 30, 2010	\$25	\$
Saturday, July 31, 2010 - Wednesday, August 18, 2010*	\$30	\$
At packet pick-up only - Friday, August 20, 2010	\$35	\$

\*(paper applications must be postmarked by Friday, August 13, 2010)

<input type="checkbox"/> \$5 Military Discount	-\$5	\$
<input type="checkbox"/> VIP Lounge	\$25	\$

TOTAL

## WAIVER & RELEASE FROM LIABILITY

I know that running and walking in a road race is a potentially hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run or walk. I also know that while police protection will be provided, there may be traffic on the course. I assume all risks associated with my voluntary participation in this event, including, but not limited to, falls, contact with other participants, the effects of the weather (including extreme weather conditions), traffic, and the conditions on the road with all such risks being known and appreciated by me. Knowing these facts, and in consideration of my accepted entry, I for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue and WAIVE, RELEASE and DISCHARGE: Vision Event Management LLC, Madison Mini-Marathon, LLC, University of Wisconsin-Madison, State of Wisconsin, Board of Regents of the University of Wisconsin System, City of Madison, their representatives, successors, or assigns from ANY AND ALL claims or liabilities, whether foreseen or unforeseen, for death, personal injury, or property damage arising out of, or in the course of, my participation in this event. I further grant full permission to the event coordinators and volunteers and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings, or other record of the event for any reasonable purpose. I understand that my entry is non-refundable.

THE ATHLETE HAS READ THE FOREGOING AND INTENTIONALLY AND VOLUNTARILY SIGNS THIS RELEASE AND WAIVER OF LIABILITY AGREEMENT.

SIGNATURE OF PARTICIPANT

SIGNATURE OF PARENT OR LEGAL GAURDIAN (if participant is under 18 years of age) DATE

WAIVER MUST BE SIGNED

FIRST NAME

LAST NAME

GENDER: M  F

BIRTHDAY: MO  DAY  YEAR

EMAIL

DAYTIME PHONE

 - 

STREET ADDRESS

CITY

STATE

COUNTRY

ZIP or POSTAL CODE

RACE DAY EMERGENCY CONTACT NAME

RACE DAY EMERGENCY CONTACT PHONE

UNISEX TECH SHIRT SIZE:

XS  S  M  L  XL  XXL

## PAYMENT BY CREDIT CARD

Account Number

Expiration Date  -  check one: ( ) Visa ( ) MC

Security Code

Signature of Cardholder:

Complete and enclose this entry form in an envelope with payment (Please make check or money order payable to **Madison Mini-Marathon**) Mail to:

**Madison Mini-Marathon Processing Center**  
13795 Oakwood Ct.  
Carmel, IN 46032

Please do not staple or tape your payment to your entry form.  
Register online at [www.MadisonMiniMarathon.com](http://www.MadisonMiniMarathon.com)