



Blues at the Crossroads Half Marathon



"RUN YOUR BLUES AWAY!"

September 11, 2010

7:30am

PARTICIPANT INFORMATION				
Last Name:		First Name:		Middle Initial:
Address:			Contact Number: ()	
City:	State:	ZIP Code:	<input type="checkbox"/> M	<input type="checkbox"/> F
Date of Birth: / /	Age on race day: <i>must be at least 12 years of age on race day</i>			
email address: _____ @ _____				
Emergency contact name:			Emergency contact phone number:	
T-shirt size (circle one): YOUTH: M L ADULT: S M L XL XXL				
<i>All shirts will be short-sleeve tech shirts and are only guaranteed to pre-registered runners.</i>				
RACE INFORMATION				
	prior to 07/01/10	prior to 09/01/10	after 9/1/2010(*)	Total amount enclosed: \$ _____
Half Marathon (run) <input type="checkbox"/>	\$35	\$40	\$50	Make checks payable to: Wabash Valley Road Runners. Send to: Wabash Valley Half Marathon, Attn.: Bruce Speth 14102 S. Geneva Hills Road, Clinton, IN 47842
Half Marathon (walk) <input type="checkbox"/>	\$35	\$40	\$50	
(*) NO RACE DAY REGISTRATION				
You must register prior to 9/1/10 to be guaranteed a shirt.				
WVRR Club members subtract \$3 from listed fees.				
Will you be riding the bus from the Wabash Valley Family Sports Center to the race start in downtown Terre Haute? (please circle one) YES NO Bus space may be llimited.				
PLEASE READ AND SIGN BELOW BEFORE SUBMITTING ENTRY				
I know that running a road race is a potentially hazardous activity that could cause injury or death. I should not enter and run unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, am in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risk associated with running in this event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or blades, animals, and radio headsets are not allowed in the race and I will abide by this guideline. Having read this wavier and knowing these facts, and in consideration of your acceptance of my entry, I for myself and anyone entitled to act on my behalf, waive and release the Wabash Valley Road Runners Club, Inc., its officers and agents, all sponsors, their representatives and successors including the Road Runners Club of America, its officers, directors, agents and employees, from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. NO REFUNDS. T-SHIRTS OR AWARDS WILL NOT BE MAILED. In addition I agree to pay a \$25 replacement fee if I do not return the timing chip assigned to me.				
Signature: _____			Date: _____	
Parent or legal guardian signature if under 18 yrs of age: _____				