



REGISTRATION FORM | 8k Training Team

ENTRY FORM AND PAYMENT MUST BE RECEIVED BY SEPTEMBER 30, 2020

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First Name

Last Name

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Street Address

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City

State

Zip

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Daytime Telephone Number

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Date of Birth (mm/dd/yy)

Have you participated in the Sports Backers 8k Training Program before? (Please check one)

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Yes / No

Predicted Finish Time: (8k or 4.97 miles)

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(Hours : Minutes)

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Sex

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E-mail Address:

Circle Technical Race Shirt Style: **Unisex** **Women's**

Circle Shirt Size (gender-specific): **S** **M** **L** **XL** **XXL**

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Nickname:

This name will be printed on your personalized 8k bib if you register by September 30. (Note: Only the first 11 characters will appear on your bib.) If you do not want your name printed on your bib, leave this field blank.

Unisex T-Shirt Size: **S** **M** **L** **XL** **XXL**

Payment Method:

Cash or Check (Payable to SPORTS BACKERS)

Credit Card (Visa, MasterCard, or American Express)

Credit Card Number: _____ - _____ - _____ - _____

Expiration Date: ___/___ Zip Code: _____ Security Code: _____

Name as it appears on card: _____

Please note:
All credit card transactions will incur a 5% processing fee.

What level would you like to train with? _____ Novice _____ Intermediate

Location where you will train (Training begins September 19) Final Locations TBD

- | | |
|--|--|
| <input type="checkbox"/> Southside - Bellemeade Community Center | <input type="checkbox"/> Goochland |
| <input type="checkbox"/> Midlothian | <input type="checkbox"/> Atlee / Hanover |
| <input type="checkbox"/> East End | <input type="checkbox"/> West End / Short Pump |
| <input type="checkbox"/> Fan / Carytown | <input type="checkbox"/> Traveling Team |
| <input type="checkbox"/> Chesterfield | |

RACE DAY EMERGENCY CONTACT

NAME _____

PHONE NUMBER _____

Every participant must sign this waiver!

Runner's Agreement, Waiver, Release, And Acknowledgment

I know that running a road race is a potentially hazardous activity. I will not enter and run unless I am qualified, in good health, medically able, and properly trained. I assume all risks associated with this event including, but not limited to: falls, contact with other participants, the effects of weather, including high heat and/or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. I acknowledge that if I believe event conditions are unsafe, I will immediately discontinue participation in the event. I fully accept and assume all responsibility for losses, costs, and damages I incur as a result of my running this event. I agree to abide by any decision of a race official relative to my ability to safely complete the event. Having read this waiver, knowing these facts, and in consideration of accepting my entry, I for myself and anyone entitled to act on my behalf, discharge, waive, and release the Metropolitan Richmond Sports Backers, Virginia Commonwealth University Health System Authority, AGA Service Company, kaléo, Inc., City of Richmond, County of Henrico, USA Track & Field, Road Runners Club of America, and any other sponsors, along with their officers, directors, agents, volunteers and employees from all claims or liabilities of any kind arising out of my participation in this event.

Signature _____

Date _____

TRAINING TEAM FEES

Includes entry into 2020 Allianz Partners 8k and Sports Backers 8k Training Team

Through September 30 \$55 = \$

Income Based Rate \$10 = \$

Donation to Kids Run RVA = \$

TOTAL = \$

You may defer your 2020 Sports Backers 8k Training Team entry until Sept 19. You may not defer your free entry in the 2020 Allianz Partners 8k.

SPECIAL RATE VERIFICATION - OFFICE USE ONLY

This individual has demonstrated eligibility of income less than \$25,000/year by providing one of the following:

- Verification/Eligibility letter from Social Services Tax Return

Approved by: _____

Name

Date

Entry fees are non-refundable and non-transferable. No exceptions. Make check payable to Sports Backers. Bring this form along with proof of need, if applicable, to the Sports Backers office located at 100 Avenue of Champions, Richmond, VA 23230.

marathon@sportsbackers.org • www.richmondmarathon.org • (804) 285-9495