



REGISTRATION FORM | Half Marathon Training Team

ENTRY FORM AND PAYMENT MUST BE RECEIVED BY AUGUST 31, 2020

First Name [] Last Name []

Street Address []

City [] State [] Zip []

Daytime Telephone Number [] Date of Birth (mm/dd/yy) [] Predicted Finish Time: (13.1 miles) [] Sex []

E-mail Address: []

Circle Technical Race Shirt Style: Unisex Women's Circle Shirt Size (gender-specific): S M L XL XXL

Nickname: [] This name will be printed on your personalized Half Marathon 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

Payment Method: 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.

As part of the training program, we subdivide the team into smaller groups. These groups are intended to be of people who have similar running abilities. In order to assign you to the proper group, please answer all of the following questions: What level of the runner are you? Please check either NOVICE or INTERMEDIATE (based on mileage). What day would you like to participate in the group runs? (Check one) Saturday Sunday Unisex Size T-shirt (Circle Shirt Size) S M L XL XXL

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 FREE entry into 2020 Richmond Half Marathon and Sports Backers Half Marathon Training Team Through July 15 \$140 = \$ July 16 - Aug 31 \$155 = \$ Income Based (through 8/31) \$25 = \$ Donation to Kids Run RVA = \$ TOTAL = \$

You may defer your 2020 Sports Backers Half Marathon Training Team until Aug 23. You may not defer your free entry in the 2020 Richmond Half Marathon.

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