2011 MEMORIAL HALF MARATHON ENTRY

Welcome to the 11th Annual
Oklahoma City Memorial Half Marathon
Please fill out this form completely. One form per individual.
Please pay close attention to the deadlines for mail-in entries.
Fields marked with an * are required.

aarp member # (5% discount to members)

promo code (if applicable)

for office use only

Presented by:

Chesapeake ENERGY

FARMERS INSURANCE GROUP® Symbol of Superior Service

All Mail-in Entries **MUST BE POSTMARKED** by: **April 1, 2011**

Race Date: **May 1, 2011**

Packet Pick-Up at the Health & Fitness Expo: **April 29 & 30**

Waiver Must Be Signed To Be Processed

I, by submitting this form acknowledge, that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that there will be a possibility of traffic on the course. I assume the risk of running in traffic. I also assume any and all other risks associated with running this event including, but not limited to falls, contact with other participants, the affects of the weather, medical conditions related to heat or hydration, and the conditions of the roads, all such risks being known and appreciated by me. Furthermore I agree to yield to all emergency vehicles. I also am fully aware that wheels of any kind except baby strollers (allowed in Memorial 5K Walk only) and competitive wheelchairs, animals and headphones are strictly prohibited and I agree not to have them on the course. Furthermore, I agree not to go back onto the course after finishing. Knowing these facts, and in consideration of your accepting my entry, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, covenant not to sue, and waive and release and discharge the Oklahoma City Memorial Marathon, the Oklahoma City National Memorial, any and all race sponsors, race officials, volunteers, local and state police, and all municipalities including any and all of their agents, employees, assigns or anyone acting for or on their behalf from any and all claims or liability for death, personal injury or property damage of any kind or nature whatsoever arising out of, or in the course of, my participating in this event. This release and waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown. The BELOW SIGNED further grants full permission to sponsors and or agents authorized by them to use any photographs, video tapes, motion pictures, recordings or any other record of this event for any purpose. Application for minor accepted only with a parent or guardian signature. I agree to pay a $40 penalty if I fail to return the ChampionChip lent me.

* date (month / day / year)

* signature

* first name / mi

* last name / * gender (M F)

* mailing address

* city

* state / * zip/postal code / * country (if not U.S.)

* phone

* email

* age on race day / * date of birth (month / day / year)

* shirt size: youth (S M L) adult (S M L XL 2XL)

* category: run / walk / roll

evening phone

preferred name on bib (leave blank if you want your first name printed on your bib)

* predicted finish time (H H : M M : S S)

Please select any additional items you wish to purchase.
The **Pasta Party** offers pasta, entertainment and fellowship while you fuel for your Run to Remember.
A **Bus Ticket** allows one person to utilize all buses (to and from designated hotels and all relay exchanges) for the entire day. **Training Shirts** are lightweight technical fabric screen printed with a unique logo for the race this year.

extra items:

pasta dinner tickets @ $10 each:

bus tickets @ $10 each:

each participant receives a race shirt. this is an extra shirt you can order. short sleeve training shirts @ $15 each (the price includes s&h):

each participant receives a race shirt. this is an extra shirt you can order. long sleeve training shirts @ $20 each (the price includes s&h):

Entry Fees: Fees are per Person.

If postmarked before April 1, 2011 - - - - - - - - - - - - - - - **$70**

* name on credit card (if paying by credit card)

* cc billing zip/postal code

* card type (VISA MasterCard American Express Cards DISCOVER NOVUS)

* card number

* CVV2/card code

* expiration (month / year)

* signature

Check www.okcmarathon.com for latest info.
We accept checks, cashier's checks and money orders. Make check payable to:
OKC Marathon

Mail to:
OCMM Entry
52 NW 42
Oklahoma City, OK 73118