

Register now to ensure your place in the marathon!

Registration

I am entering (circle one):

Marathon Half-marathon 5k

Name _____
Please print legibly

Address _____

City _____

State _____ Zip _____

Phone _____

Email _____

Gender: M F Age on race day: _____

Emergency Contact _____

Emergency Contact Number: _____
(Prefer cell phone number)

Shirt Size: S M L XL XXL

Group Affiliation Code: _____
(If applicable: company, running club/group, military, NAIA, etc.)

Marathoners - #Marathons completed: _____

Estimated finish time _____

Registration forms are utilized the day before and day of the race by Olathe Chamber of Commerce staff. Forms are shredded within a week after the race.

Fees, Payment Method and Liability

Marathon (thru 3/10/10) \$70 _____

Marathon (thru 4/07/10) \$85 _____

Marathon (on 4/09/10) \$95 _____

Half-marathon (thru 3/10/10) \$50 _____

Half-marathon (thru 4/07/10) \$60 _____

Half-marathon (on 4/09/10) \$80 _____

5k (thru 4/09/10) \$20 _____

5k (on 4/09/10) \$25 _____

* includes \$5 processing fee

(NO RACE DAY REGISTRATION)

ENTRY FEES ARE NON-REFUNDABLE AND
NON-TRANSFERABLE.

___ Enclosed Check (payable to Olathe Chamber of Commerce)

Credit Card # _____

Last Three Digits on Back of Card _____

Expiration Date _____

Signature _____

Release from Liability

As a participant or legal guardian representing a minor participant, I agree to release the Olathe Chamber of Commerce officers and employees, City of Olathe, Johnson County Government, and volunteers from any and all liability for accidents, injuries, loss of and/or damage to my person/my minor or property that may arise out of my or my minor's participation in and our presence at the Olathe Marathon, Half-marathon and 5k. I understand the risks and possible dangers of participating in these activities. I agree to pay a \$60 penalty if I fail to return the timing chip lent to me. I agree that pictures of me/my minor can be used by the Olathe Chamber of Commerce for promotional purposes. I have entered into this agreement of my own free will. I have read and understand the release from liability.

Signature of Entrant or
Legal Guardian of Entrants under 18
yrs.

Date

Please return form to:
Olathe Marathon
18001 W 106th St, Suite 160
Olathe, KS 66061