

Azalea Trail Run Rewards Program Form

Please print to fill this form out completely and clearly.

AZALEA TRAIL RUN 2010 - March 27, 2010 - OFFICIAL ENTRY FORM

Last Name:

First Name: Middle Initial:

Age on 3/27/2010 Female Male Date of Birth ZIP Code -

Address:

City: State

Phone: - - E-mail:

Event *Check One Only*
 10K 5K *New 2K Fun Run

Category *Check One Only*
 Runner/Walker Race walker Wheelchair Prosthesis

T-Shirt (Adult Sizes) *Check One Only*
 Youth Large Small Medium Large X-Large XX-Large

DRUG STATEMENT: Athletes who participate in this competition may be subject to formal drug testing in accordance with USA Track & Field regulation 10 and IAAF Rule 55. Athletes found positive for banned substances, or who refuse to be tested, will be disqualified from this event, and will lose eligibility for future competitions. **SOME OVER-THE-COUNTER MEDICATIONS MAY CONTAIN BANNED SUBSTANCES.** Information regarding drugs and drug testing may be obtained by calling the USOC Hotline at 1-800-233-0393.

RELEASE FORM: 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 risks 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 waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Port City Pacers Road Runners Club, Inc (PCP), its sponsors, agents, servants, representatives, licensees, contractors, successors, and assigns organizing and conducting the Azalea Trail Run (Road Race), held on March 27, 2010, and allowing me to participate and run in said race, I hereby waive, release and discharge forever said PCP and its said sponsors, agents, servants, representatives, licensees, contractors, successors, and assigns from any and all claims or liabilities of any kind arising out of my participation in the Azalea Trail Run, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I give permission for the use of name and/or picture in any broadcast, telecast or other account of this event.

Signature _____ Date _____

Parent(Guardian) _____ If under 18, the signature of parent/guardian is also required.

ATR Open Registration (Adult)	Deadline 3/13/2010	Each student, teacher, and parent who registers for the Azalea Trail Run through the ATR Rewards Program will earn \$1 for their school or youth organization. Each student, teach, and parent who registers and completes one of the ATR events will earn \$2 for their school or youth organization.
10K or 5K	\$20 <input type="checkbox"/>	If a school or youth group coordinator is not available, please mail fees and entry forms directly to the Azalea Trail Run.
2K Fun Run	\$14 <input type="checkbox"/>	
ATR Youth Registration (15 and Younger)		
10K or 5K	\$12 <input type="checkbox"/>	
2K Fun Run	\$10 <input type="checkbox"/>	

ATR Rewards Program for K through 12 Schools and Youth Organizations - Fill in School Name or Youth Organization

Complete this form and return it with your entry fees to your School Coordinator by March 13, 2010. To be credited to the ATR Rewards Program, all applications and fees must be received by the Azalea Trail Run by March 17, 2010.

Make checks payable to: AZALEA TRAIL RUN Form and fees may be mailed directly to: AZALEA TRAIL RUN, P.O. Box 6427, Mobile, AL 36660