



# TOYOTA kids marathon

FIRST NAME MIDDLE INITIAL LAST NAME

--	--	--

MALE  
 FEMALE

ADDRESS

--

CITY, STATE, ZIP

--

DAY PHONE EVENING PHONE DATE OF BIRTH

--	--	--	--

E-MAIL ADDRESS AGE ON RACE DAY

--	--

YOUTH T-SHIRT SIZE PREFERENCE S  M  L  XL  XXL

PARENT/GUARDIAN NAME

--

## ENTRY INFORMATION

### KIDS' MARATHON

- \$15 through April 30
- \$20 May 13 & 14 if available

CHILDS SCHOOL

--

CHILDS SCHOOL DISTRICT

--

You may also register on-line at [www.pittsburghmarathon.com](http://www.pittsburghmarathon.com).

### AMOUNT ENCLOSED

METHOD OF PAYMENT  CHECK MADE PAYABLE TO PITTSBURGH THREE RIVERS MARATHON  MC  VISA

or send form and payment to Pittsburgh Three Rivers Marathon, 310 Grant Street, Suite 1123, Pittsburgh, PA 15219.

**Mail-in registrations not accepted after January 14, 2011.**

**Online registration closes April 30, 2011 or if the event sells out.**

CARD NUMBER EXP. DATE

--	--

PRINT NAME ON ACCOUNT CARDHOLDER SIGNATURE DATE

--	--	--

### Liability Waiver and Release

Liability Waiver and Release: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, all such risks being known and understood by me. I am aware that medical support for this event will be provided by volunteer personnel who may be called upon to provide assistance, including first aid, to me during the event. I authorize any such volunteer to assist me or to perform such assistance as, in the opinion of such person may be necessary or appropriate. I understand that Pittsburgh Three Rivers Marathon, Inc., Dick's Sporting Goods, Inc., UPMC Health Plan, Inc. and the other sponsors of the Dick's Sporting Goods Pittsburgh Marathon, UPMC Health Plan Pittsburgh Half Marathon, and the related events assume no responsibility or liability with respect to my participation in this event. I agree, however, to abide by any decision of any race official relative to my ability to safely complete the race for which I am registered. I agree to abide by the rules of this race as stated in all official race information.

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, do hereby release and discharge the Pittsburgh Three Rivers Marathon, Inc., Dick's Sporting Goods, Inc., UPMC Health Plan, Inc., Federal Express Corporation, sponsor(s) of the Kids Marathon, the City of Pittsburgh, Allegheny County, USATF and all other sponsors, representatives (including event volunteers), and employees of any of them, from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Athletes who participate in this competition may be subject to formal drug testing in accordance with the USA Track & Field rules and IAAF rule 144. Athletes found positive for banned substances and refuse testing, will be disqualified from this event and will lose eligibility for future events. Some prescription and over-the-counter medications contain banned substances. Information regarding drugs & drug testing may be obtained by calling the USOC Hotline at 1-800-233-0393.

Publicity Release: I hereby grant permission to Pittsburgh Three Rivers Marathon, Inc. and its sponsors to use for all legitimate purposes, any photographs, motion pictures, recordings or any other record in any form, in which an image or record of me or my voice may be included, which image or record was taken or recorded before, during or after, or is otherwise associated with, the Dick's Sporting Goods Pittsburgh Marathon, UPMC Health Plan Pittsburgh Half Marathon, FedEx Ground Pittsburgh Marathon Relay, Kids Marathon, the Health and Fitness Expo, and/or any of the related events.

I understand and agree to the waiver and release

Signature for Waiver and Date

(Signature of Parent or Legal Guardian if under 18)

