Mill Race Marathon and Half Marathon, & 5K

2023 OFFICIAL ENTRY FORM

Saturday, September 23, 2023 ***(Kids Run on Friday, September 22, 2023)***

One person per entry form, form may be duplicated. **Mail-in entry deadline is August 31, 2023** **NO REFUNDS**

FIRST NAME

LAST NAME

GENDER M F AGE BIRTHDAY (MM / DD / YYYY)

T-SHIRT - ADULT SIZE (Unisex) S M L XL 2X

EVENT FULL HALF 5K KIDS School (Kids)

T-Shirt - YOUTH SIZE S M L

EMAIL (Email required to get pre-race updates.)

STREET ADDRESS

CITY STATE ZIP or POSTAL CODE

DAYTIME PHONE ( ) -

EVENING PHONE ( ) -

RACE DAY EMERGENCY CONTACT NAME

RACE DAY EMERGENCY CONTACT PHONE ( ) -

MAIL ENTRIES TO:

Mill Race Marathon PO Box 1317, Columbus, IN 47202

(Make Checks Payable to Mill Race Marathon)

Pace Limits: Full - 15 min/mile; Half - 17 min/mile; 5K - 22 min/mile

PICK	DESCRIPTION	RATE
	MARATHON ENTRY (Postmarked by 6/30/23)	75
	MARATHON ENTRY (Postmarked by 8/31/23)	85
	HALF MARATHON ENTRY (Postmarked by 6/30/23)	60
	HALF MARATHON ENTRY (Postmarked by 8/31/23)	70
	5K RUN/WALK ENTRY (Postmarked by 6/30/23)	25
	5K RUN/WALK ENTRY (Postmarked by 8/31/23)	30
	KIDS RUN ENTRY NO Shirt (Postmarked by 8/31/23)	0
QTY.	**EXTRAS**	**RATE**
	KIDS RUN SHIRT (Postmarked by 8/31/23)	7
	GRAND TOTAL	

WAVE START

Estimated Finish Time ***REQUIRED***

WAIVER & RELEASE FROM LIABILITY

In consideration of acceptance of my entry, I, for myself, my executors, heirs, administrators, personal representatives, successors and assigns, hereby release, discharge and agree to hold free and harmless the City of Columbus Indiana, Cummins Inc., Columbus Running Club, Healthy Communities Initiative, Sauer Race Management, USA Track & Field, any and all sponsors, officials, or organizers of the 2023 Mill Race Marathon Powered by Cummins and each of them together with their successors, assigns, officers, agents and employees from any and all liability for injuries to property or person suffered by me as a result of my participation in this event and any pre- or post-race activities. By execution of this waiver, I assume all risks associated with my participation in this event including, but not limited to falls and the effects of volunteers, staff, other participants, weather, traffic, and road conditions; and acknowledge and accept that all such risks are known and appreciated by me.

I verify that I am physically fit and I have sufficiently trained for the competition of this event and that a licensed medical doctor has verified my physical condition. I further grant full permission to any and all of the foregoing to use and reproduce my image or likeness by any visual recording techniques (including electronic/digital) now in existence or hereafter invented, for any legitimate purpose, including marketing purposes.

SIGNATURE OF PARTICIPANT DATE

SIGNATURE OF PARENT (if participant is under age 18) DATE