

9th Annual Delaware Marathon Running Festival

Sunday May 13th, 2012

Title Sponsor: Christiana Care Health System
Eight Person Relay Sponsor: Discover Bank

Presented By New Balance Delaware

Eight Person Team Relay Registration Form

- 8 person Relay: \$320 - \$40.00 per runner (\$400/8 if postmarked after April 1, 2012) \$ _____
- Voluntary Donations to the **Heart and Vascular Center, Helen Graham Cancer Center** or any of our other charity beneficiaries _____ \$ _____

All 8 Relay Entry Forms Must Be Submitted Together with Payment

Team Name: _____

Full Name: _____
Last First

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____ M__ or F__

Age on May 13, 2011: _____ Phone: _____ Shirt (circle one) S M L XL

**Gender Specific Shirt

Participant Signature: _____ Guardian Signature (if under 18): _____

Team Captains: Please print the name and the estimated race time for each member of your team.

***This will be your race day order.**

1. _____ - ____ : _____

5. _____ - ____ : _____

2. _____ - ____ : _____

6. _____ - ____ : _____

3. _____ - ____ : _____

7. _____ - ____ : _____

4. _____ - ____ : _____

8. _____ - ____ : _____

Knowing that a marathon is a physically demanding endeavor, I, in consideration of this entry being accepted, hereby, for myself, my heirs, and executors, waive and release any and all civil rights I may have against the organizers, sponsors, or benefactors holding this event for any and all injuries suffered by me at said race. Please discourage unofficial entrants (bandits) from competing in our races. Bandits consume scarce resources and can delay or inhibit accurate race results. Unregistered runners, running with dogs, strollers, rollerblades, bicycles, and the wearing of headphones are prohibited on the race course at any time to ensure runners safety and to comply with liability insurance standards.