

# Special Early Reduced Fee Application for the Run Events of the 38<sup>th</sup> Annual Charleston Distance Run 15 Mile, 3-Person 15 Mile Relay & 5K Runs Saturday, September 4, 2010, 7:30am – Charleston, WV

Send check or money order to:                      15 Mile Race                      5K Race & 3-Person 15 Mile Relay (each Person)  
 Charleston Distance Run Committee              \$20 Postmarked by May 1, 2010      \$15 Postmarked by May 1, 2010  
 PO Box 11595  
 Charleston, WV 25339

**After May 1, 2010, this early registration offer is null and void**

>>> NO REFUNDS ON ANY FEES <<<

Website: www.charlestdistancerun.com

Phone: 304-345-5433 (voice mail)

Check appropriate race:    15 Mile \_\_\_\_\_    3-Person 15 Mile Relay \_\_\_\_\_    5K \_\_\_\_\_

**PLEASE PRINT CLEARLY**

MALE \_\_\_\_\_ FEMALE \_\_\_\_\_

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_

AGE ON 9/04/2010 \_\_\_\_\_

STREET ADDRESS or PO BOX \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_

(\_\_\_\_) \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ E-MAIL \_\_\_\_\_

HOME PHONE                      WORK PHONE

FREE RUNNER'S T-SHIRT SIZE:    (All shirts adult sizes - Circle one):                      S    MED    L    XL    XXL

OPTIONAL Souvenir Shirt:    (Please include payment with entry fee)

\$10/ea Short Sleeve (indicate size \_\_\_\_\_ & quantity \_\_\_\_\_)      \$15/ea Long Sleeve (indicate size \_\_\_\_\_ & quantity \_\_\_\_\_)

Circle one:    INDIVIDUAL    WHEELCHAIR    HANDCYCLE    15 MILE TEAM    3-PERSON 15 MILE RELAY

IF 15 MILE TEAM (Circle one): FEMALE OPEN    MALE OPEN    MIXED    MALE MASTERS    FEMALE MASTERS

IF 3-PERSON 15 MILE RELAY (Circle one): FEMALE    MALE    MIXED    MALE MASTERS    FEMALE MASTERS

NAME OF TEAM / RELAY: \_\_\_\_\_

**Team and relay applications must be submitted together**, otherwise applicants will be limited to the individual classifications. For team entries a maximum of four (4) team members, with only the three (3) top members to determine the standings in the Team competition.

Predicted time this race: \_\_\_\_\_      Last year's time: \_\_\_\_\_

Best Times 2009-2010:    5K \_\_\_\_\_    10K \_\_\_\_\_    20K \_\_\_\_\_    ½ Marathon \_\_\_\_\_    Marathon \_\_\_\_\_

**WAIVER:** I, the undersigned, waive and release myself, my heirs, executors, and administrators, any and all rights and claims for damages, demands, and any other actions whatsoever, which I may have against the Charleston Distance Run Committee, the City of Charleston, all participating sponsors and supporters of those entities, successors, representatives, and assigns, arising out of my participation in this event, including any and all injuries including death suffered by me as a result of my participation in this event. I consider myself adequately trained for the completion of this event. Should I suffer an injury or illness, I authorize officials of this race to use their discretion to have me medically treated and transported to a medical facility. I also authorize the Charleston Distance Run Committee to use any photograph or video taken of me during any of the Charleston Distance Run events to be used in any promotional materials.

\_\_\_\_\_  
SIGNATURE (Parent or Guardian MUST sign if under 18)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
DATE