

ATLANTA MARATHON

HALF MARATHON • THANKSGIVING DAY

Official 2009 Race Registration November 26, 2009

Make checks payable to **Atlanta Marathon**.
Return to Atlanta Track Club, P.O. Box 12109, Atlanta, GA 30355.
(404) 231-9064 • Register online at www.atlantatrackclub.org

Step 1: Registration: Please fill out all information below. Incomplete or unsigned entries WILL not be accepted.
And sorry, but no refunds.

<input type="text"/>	<input type="text"/>	Predicted Time	<input type="text"/>	<input type="text"/>
LAST NAME	JR., SR., III, etc.	Hours: Minutes		
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
FIRST NAME	M.I.	MARATHON (Min. Age 18)	HALF MARATHON (Min. Age 14)	KIDS FUN RUN (Ages 7-12)
<input type="text"/>				
ADDRESS (NUMBER AND STREET) C/O. APT. NUMBER, P.O. BOX, ROUTE NO.				
<input type="text"/>	<input type="text"/>	Adult T-Shirt	Long-Sleeved Technical Shirt	
CITY	STATE	<input type="text"/>	S	M
<input type="text"/>	<input type="text"/>	Kids' Run T-Shirt	L	XL
U.S. ZIP CODE	COUNTRY	<input type="text"/>	YM	YL
<input type="text"/>	<input type="text"/>	<input type="text"/>	S	M
AREA CODE	DAYTIME PHONE	SEX: M or F	AGE (ON 11/26/09)	BIRTH DATE (MM-DD-YY)
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
E-MAIL ADDRESS				
<input type="text"/>				

Are you running for a specific charity, and if so which one? _____

RACE DAY EMERGENCY CONTACT: NAME _____ PHONE NUMBER _____

Step 2: Release and Waiver: NO APPLICATION WILL BE ACCEPTED WITHOUT A SIGNED WAIVER.

WAIVER AND RELEASE FORM: For and in consideration of the acceptance of my entry in the Atlanta Marathon and Half Marathon to be held on November 26, 2009. I attest that I am physically fit, have sufficiently trained for and am mentally and physically capable of participating in this road race event. My participation is voluntary and is done at my own risk. I understand that participation in the Atlanta Marathon and Half Marathon is an inherently dangerous activity and that risks of participating include, but are not limited to, death and serious bodily injury. I assume all risks associated with participating in this event including, but not limited to, the weather, to include high heat and humidity, conditions of the road and other race area surfaces, falls, collisions, motor vehicle traffic, and the conduct of spectators and other runners. I hereby, for my myself, my heirs, my administrators and executors, personal representative and I assigns forever waive, release and discharge any and all rights and claims for damages or losses, whether monetary or otherwise compensatory, that I may have against: (i) the Atlanta Track Club, its directors, executive director, officers, employees, members, representatives and agents; (ii) Braves Productions, Inc., Atlanta National League Baseball Club, Inc., City of Atlanta and Fulton County Recreation Authority, City of Atlanta, Fulton County; (iii) all other sponsors of the race, their affiliates, their representatives and successors; (iv) all the Atlanta Marathon and Half Marathon officials, participants, organizers, planners, volunteers and (v) the City of Atlanta for any injuries sustained by me arising out of my association with, entry in, or participation in the Atlanta Marathon and Half Marathon and any pre-, post-, or other race related activity. I understand and agree that medical or other services rendered to me by or at the instance of any of the above parties is not an admission of liability to provide or continue to provide any such services and is not a waiver by any said parties of any right hereunder. I also acknowledge that should I require transport to a medical facility, I must pay for such transportation and any treatment provided. I further agree now and forever to hold the above named and unnamed parties harmless and indemnify, and covenant not to sue them for all claims, damages, judgments, and costs of whatever nature and form. I agree to abide by all instructions from race officials and I agree to withdraw from the race if such official in his or her judgment and discretion determines that I should not participate including because my participation poses a threat to the safety of myself or because I did not abide by any instruction given to me. I understand and will abide by the rule that for safety, no wheeled vehicles or wheeled means of conveyance are permitted in the footrace. I grant permission to the Atlanta Track Club and others to use any photographs, videotapes, motion pictures, recordings or any other record of me and/or this event for any legitimate purpose. I also grant permission for the Atlanta Track Club to contact me by email for race-related communications. I understand that the race entry fees paid by or for me are nonrefundable. The no refund policy applies to any cancellation of the race for weather or other circumstances as deemed appropriate by the official race director. NUMBERS FOR EITHER RACE ARE NOT TRANSFERABLE.

ENTRY FEES	Marathon	Half Marathon	Kids' Fun Run
Through 8/31	\$60	\$45	\$10
9/1 – 10/31	\$70	\$55	\$10
11/1 – 11/22*	\$80	\$65	\$10
At Expo on 11/24	\$90	\$75	\$15
TOTAL AMOUNT ENCLOSED \$ _____			

* Online registration only. All paper applications MUST be postmarked by 10/31.
Late entries accepted only on Tuesday, November 24, 2009, 11 a.m. to 8 p.m. at the Atlanta Marathon and Half Marathon Expo, held at the InterContinental Hotel Buckhead, 3315 Peachtree Road, Atlanta. The right to reject any entry or to issue special invitation is reserved. RACE NUMBERS ARE NOT TRANSFERABLE. No race numbers will be mailed. No race number pick-up on race day. See instructions for race number pick-up information.

DATE _____ SIGNATURE (required) _____ PARENT'S SIGNATURE IF UNDER 18 YEARS (IN ADDITION TO CHILD'S SIGNATURE) _____

Step 3: Mail. Send completed and signed form and entry fee to:

ATLANTA MARATHON Atlanta Track Club P.O. Box 12109, Atlanta, GA 30355