

# 2010 Platte River Half Marathon & Buckhorn Exchange Relay

## Race Entry

www.platteriverhalf.com

For official use:

Bib#: \_\_\_\_\_

\_\_\_\_\_  
(Please Print) First Name

\_\_\_\_\_  
Last Name

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
ZIP

\_\_\_\_\_  
Email

\_\_\_\_\_  
Phone

Sex :     Male             Female

Event:    ½ Marathon    Buckhorn Exchange Relay

Age on 4/11/10 : \_\_\_\_\_

Entry Fee before February 15th:            \$40 per person or \$90 per relay team  
Between February 15th and April 4th:       \$50 per person or \$105 per relay team  
Between April 5th and April 10th:           \$60 per person or \$120 per relay team  
Race Day Entry Fee:                            \$70 per person or \$135 per relay team

Shirt Size:         Small             Medium             Large             X-Large

Relay Team Name (if applicable): \_\_\_\_\_

I, the person submitting this entry, am aware that participating in an event such as a ½ marathon (13.1 miles) or ½ marathon relay is a potentially hazardous activity, and that I (or my child, if I am signing as parent/guardian) should not so participate unless physically able. I verify that I am (or my child is) medically fit to participate and will have sufficiently trained for the event prior to participation. I (and my child, if I am signing as parent or guardian) agree to abide by the rules and decisions of any event officials relating to participation and assume all risks associated with participation in the event and any associated event or activities, including but not limited to, falls, contact with other participants, effects of the weather such as extreme cold, snow and ice, traffic and road conditions, all such risks being known and appreciated. In consideration of acceptance of the entry fee, and intending to be legally bound, I (and my child, if I am signing as parent/guardian) and anyone entitled to act on my (or our behalf(s)), assume all risks associated with participation and waive any and all claims whatsoever against and fully release race day volunteers, all event promoters and sponsors and their representatives and successors from all claims damages or liability of any kind arising from my (or my child's) participation in this event. I grant full permission to any and all of the foregoing to use my (and my child's) name or photographs, videotapes and other recordings of participation in this event without obligation or liability to me (or my child). I also understand that entry fees are not refundable. I have read this agreement carefully and understand it and certify my agreement by my signature below. Note: Runners under 18 years of age must have parent's signature below.

\_\_\_\_\_  
Signature (if under 18 years of age, guardian must sign)

Send to:  
Alamo Events  
4029 South Roslyn Street  
Denver, CO 80237

Please make checks payable to: Alamo Events