



MARTINSVILLE

HALF MARATHON, 5K & RELAY

TRANSFORM YOUR LIFE!

Please complete one registration form for each participant. All rates listed are per person.

When: March 23, 2013 - 8:00am

Where: Martinsville YMCA

Registration*: \$20 for 5K and Relay or \$40 for Half Marathon before January 16th

\$25 for 5K and Relay or \$45 for Half Marathon January 16th - March 3rd

\$30 for 5K and Relay or \$50 for Half Marathon March 4th - Race Day

Awards: Overall Winners, Five Year Age Groups for the 5K and Half Marathon, Top Divisions for the Relay

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Date of Birth ____ / ____ / ____ Age (as of race day) _____ Male | Female (circle one)

E-Mail _____ Phone Number _____

Select Race (check one) ☐ Half Marathon ☐ 5K ☐ Relay (circle category) male - female - coed

Relay Team Members _____

Company Name (if entering corporate challenge) _____

Shirt Size (circle one) S - M - L - XL - XXL (gender specific for half marathon only)

Waiver: In consideration of the acceptance of my entry, I hereby waive on behalf of my heirs, executors and assigns, all claims of any nature arising from my participation in the Martinsville Half Marathon, 5K & Relay, and do hereby release Activate MHC, the Martinsville-Henry County Family YMCA, all sponsors, adjacent property owners, workers, officials, and volunteers from any claim what so ever arising from my participation in this event. I agree to abide by all the rules for participation, and acknowledge that the race committee may refuse or return my entry at its' discretion. I further grant permission to Activate MHC to use any photographs, motion pictures, or other recording of the event for legitimate purposes. In addition, I understand the race will be held rain or shine and there are no refunds. I verify that I have full knowledge of the risks involved in this event and I am physically fit and sufficiently trained to participate in the event.

Entry Signature _____ Date _____

Parent's Signature (required of entrants under 18) _____ Date _____

Emergency Contact _____ Phone _____

Title Sponsor:



* Checks should be made payable to **YMCA**.
Registrations may be turned in at the **Martinsville YMCA** or mailed to:

Activate MHC
3 Starling Avenue
Martinsville, VA 24112

Presented By:



online registration available at:

www.milesinmartinsville.com

||||| MILES IN |||||
MARTINSVILLE

Supporting Outreach Programs of the YMCA and Activate MHC