



33rd Annual St. Louis Track Club Half Marathon

stlhalfmarathon.org
active.com



7:30am, Sunday, Nov. 4, 2012

Center of Clayton

50 Gay Ave.

Clayton MO 63105

Show Your Stride

- Prize money for Open & Masters Divisions. Refer to stlhalfmarathon.org for details.
- 5-year Age Group Awards starting at 14-19
- All New Custom Commemorative Finisher Medals
- Long Sleeve Technical Shirts guaranteed to ALL entrants

stlouistrackclub.com 6136 Southwest Ave., St. Louis MO 63139 (314) 781-3926 sltcoffice@yahoo.com facebook/saintlouistrackclub twitter @STLTrackClub

Make Checks Payable To: **St. Louis Track Club**, 6136 Southwest Ave, St. Louis MO 63139

FIRST NAME: _____ LAST NAME: _____ PH: (XXX-XXX-XXXX) _____

ADDRESS: _____ CITY/STATE/ZIP: _____

DOB: MM/DD/YYYY ____/____/____ AGE ON RACE DAY (MINIMUM AGE 14): _____ GENDER: MALE FEMALE

SLTC MEMBER: YES NO SLTC MEMBER #: _____ USATF# (NOT REQUIRED): _____

EMAIL: _____ CIRCLE SHIRT SIZE: MALE: S M L XL XXL FEMALE: S M L XL XXL

AMOUNT: *\$45 BY 2/29/2012 *\$50 BY 6/30/2012 *\$55 BY 11/2/2012 \$60 AFTER 11/2/2012

* SLTC MEMBERS AND LAW ENFORCEMENT DEDUCT \$10 BEFORE 11/2/2012. NO DISCOUNTS AFTER 11/2/2012. NO REFUNDS.

Release and Waiver

I, the undersigned, acknowledge and certify that: (1) I am in excellent condition and have no medical condition that could likely be worsened by participation in this event; (2) I have trained properly for this event; (3) I am fully aware of and assume the risks associated with adverse weather conditions, and I appreciate and assume all risks associated with the presence of vehicular traffic on the race course; and (4) I am solely responsible for my own safety while traveling to or from or participating in this event. In consideration of the foregoing and of your accepting this entry, the undersigned, intending to be legally bound hereby, for myself, my heirs, executors, administrators and assigns, waives, releases, discharges and covenants NOT TO SUE Special Olympics – Missouri, The St. Louis Track Club, the City of Clayton, the City of University City, the City of St. Louis, or any Sponsor or contributor to this event, any race officials or volunteers, their representatives, successors or assigns, from any and all claims or liability for death or for damages for any and all injuries to me or my property including without limitation claims or liability resulting from those matters described in the preceding paragraph. This Release and Waiver extends to all claims of any kind or nature, whether foreseen or unforeseen, known or unknown. I further grant full permission to Special Olympics – Missouri and the St. Louis Track Club and/or agents authorized by them, to use my likeness, voice and words in television, radio, film or in any form to promote activities of Special Olympics – Missouri, or the St. Louis Track Club.

SIGNATURE (PARENT OR LEGAL GUARDIAN MUST SIGN HERE IF UNDER 18 – NO EXCEPTIONS)

DATE (MM/DD/YYYY)