

Half Marathon/5K Run



Marine Corps Logistics Base
Albany, GA
proudly presents the
**ANNUAL BASE HALF
MARATHON & 5K RUN**
(Open to the public)
January 30, 2010

Time: Half Marathon: 8:00 A.M. ♦ 5K: 8:20 A.M.

Entry Fee: \$20.00 Pre-Registration (until 22 January), \$25.00 on Race Day.

Online Entry: Entry information, directions and details at www.albany.usmc.mccs/run

Medals: Will be presented to the top two (2) men/women in the following age divisions for each race: under 14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70+

Amenities: All runners pre-registered prior to 22 January, 2009 are guaranteed an official race t-shirt. Water stations every 2 miles & post-race refreshments available.

Packet Pickup: There will be no pre-race packet pick-up for the run. All runners will receive their race numbers and chips on the day of the race. T-shirts and goody bags will be given out as runners register and pick up their numbers.

Security Measures: Runners who do not possess a base decal or a common access card will be required to park outside the main gate and walk ¼ mile to the starting area. All visitors to MCLB Albany are subject to security measures including search of persons and possessions. Visitors are cautioned not to bring guns, knives, explosives, or any illegal materials aboard the installation.

Questions?: Call 229-639-5246 or email daniel@dusmc-mccs.org.

Mail Entry: You may register on-line at active.com or fill out below form, attach payment payable to **MCCS**, and mail to:

**Attn: Half Marathon/5K Run,
Marine Corps Community Services, 814 Radford Blvd. Suite 20322
Albany, GA 31704-0302**

Race: ___ ½ Marathon or ___ 5K
Age on Race Date: _____ T-Shirt Size – Adult: S___ M___ L___ XL___
Gender: M ___ F ___
Last Name: _____ First Name: _____
Address: _____ City: _____ State: _____
Zip Code: _____ Phone: (____) _____ - _____ E-Mail: _____
Amount Enclosed: \$ _____

WAIVER MUST BE READ AND SIGNED BEFORE MAILING:

I, the undersigned, do hereby waive and release all rights and claims for damage I may have against the U.S. Marine Corps and MCLB Albany, and all sponsors, officials, and volunteers of this race from an liability arising from any illness, injury, or damage I may suffer as a result of my participation in this event. I authorize the organizers and support personnel to obtain and administer medical aid in the event of its necessity. I also give permission for free use of my name and photographs in any broadcast, telecast or print media account of this event. I attest and clarify that I am physically fit and have trained sufficiently for this event.

RUNNER'S SIGNATURE REQUIRED: _____ Date: _____
(Parent's Signature if under 18)