



M | METRO HEALTH

Grand Rapids Marathon

Foster Swift Half Marathon | Pepsi Zero Sugar Marathon Relay

2019 Registration

Circle what you're doing	Marathon	Half-Marathon	Relay
January 1 - May 15, 2019	\$125.00	\$105.00	\$250.00
May 16 - August 15, 2019	\$135.00	\$115.00	\$270.00
August 16 - September 30, 2019	\$145.00	\$125.00	\$290.00
October 1 - October 18, 2019	\$155.00	\$135.00	\$310.00
At Expo (if not filled)	\$160.00	\$140.00	NA

Name: _____ Male Female
 Address: _____
 City, State, Zip _____
 Country: _____ Phone: _____
 Email: _____
 Age on Race Day: _____ Date of Birth: _____
 Shirt Size **WOMEN** Xsmall Small Medium Large XLarge XXLARGE
 (Circle a size) **MEN** Small Medium Large XLarge XXLARGE
 First time marathon/half YES NO
 Emergency Contact: _____
 Expected Finish: _____ Hrs _____ Min _____ Sec

**Note: DISCOUNT CODES
AND CREDIT CARDS CAN
ONLY BE USED WITH
ONLINE REGISTRATION**

**Make checks payable &
mail to:**

**Grand Rapids Marathon,
LLC
PO Box 1041**

Disclaimer In consideration of you accepting this entry, I, the participant, intending to be legally bound do hereby waive and forever release any and all right and claims for damages or injuries that I may have against the Event Director, RunSignUp.com, and all of their agents assisting with the event, sponsors and their representatives, volunteers and employees for any and all injuries to me or my personal property. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able to do so and properly trained. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, traffic, and course conditions, and waive any and all claims which I might have based on any of those and other risks typical found in running a road race. I acknowledge all such risks are known and understood by me. I agree to abide by all decisions of any race official relative to my ability to safely complete the run. I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that a licensed Medical Doctor has verified my physical condition.

In the event of an illness, injury or medical emergency arising during the event I hereby authorize and give my consent to the Event Director to secure from any accredited hospital, clinic and/or physician any treatment deemed necessary for my immediate care. I agree that I will be fully responsible for payment of any and all medical services and treatment rendered to me including but not limited to medical transport, medications, treatment and hospitalization.

By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) having read and agreed to the above release and waiver.

Further, I grant permission to all the foregoing to use my name, voice and images of myself in any photographs, motion pictures, results, publications or any other print, videographic or electronic recording of this event for legitimate purposes.

I, the undersigned, have read the above waiver and release, and understand that I have given up substantial rights by signing it, and sign it voluntarily.

