

CAPITAL CITY MARATHON

(U.S. Funds Only Please)

- **No Day of Race Registration, Race Changes Only.**
- No refunds, substitutions or carry-overs.
- No dogs, bikes, strollers, rollerblades or skates allowed on the courses.
- Confirmations will be sent to **online** registrants only.
- Runners must be at least 16 years old to run the Marathon and at least 14 years old to run the Half Marathon.
- Marathon runners must maintain a pace of 14:30 minutes per mile (or faster) to complete the event before the course closes at 1:30 p.m. (approximately 6 1/2 hours). Runners unable to maintain a 14:30 pace should enter the Half Marathon.
- Shirts are manufactured six weeks prior to the event; therefore, we are not able to guarantee shirt sizes
- **Runners who register Saturday, May 15 are not guaranteed a shirt.**

Mail-in entries with payment must be postmarked no later than April 30.

Online registration deadline is midnight, Thursday, May 13.

Runners may register in person at packet pickup Saturday, May 15.

	Through April 30	After April 30
Marathon	\$70	\$85
Half Marathon	\$55	\$70
Five Miler	\$30	\$35

For mail-in registrations, make Checks Payable to CCMA and Mail to:

**CCMA
P.O. Box 1681
Olympia, WA 98507**

CAPITAL CITY MARATHON

REGISTRATION FORM

Event Date: Sunday, May 16, 2010

Please Print Clearly

*Please Complete All Areas of the Registration Form
Must be postmarked no later than April 30*

Please Note: No Confirmations / No Refunds / No Substitutions / No Day of Race Registration

Marathon **Half Marathon** **Five Miler**
___ 7:00 a.m. ___ 7:45 a.m. ___ 8:00 a.m.

Name (First/Last) _____

Address _____

City, State, Zip/Postal Code _____

Email Address _____

Phone (Day) _____ (Evening) _____

DOB _____ Age on 5/16/10 _____ Sex M___ F___ Wheelchair ___

Shirt Sizes (unisex) XS ___ S___ M___ L___ XL___ XXL___

Do you own a Champion Timing Chip? # _____

Pasta Dinner, Waterstreet Cafe, 5-7 p.m., Saturday, May 15th, \$12 per person: number of dinners _____

READ THIS!

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including but not limited to falls, contact with other participants, the effects of the weather (including high heat and/or humidity), the conditions of the road and traffic on the course, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your acceptance of my entry, I, for myself and anyone entitled to act on my behalf, waive and release the cities of Olympia, Tumwater and Lacey, Thurston County, the state of Washington, Capital City Marathon Association, Road Runners Club of America, South Sound Running, all sponsors, volunteers and their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant my permission to all of the foregoing to use photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose. I also understand that my entry fee is nonrefundable. A parent must sign if entrant is under 18 years of age. This is to certify that my child has permission to compete in this event, is in good physical condition and the event officials may authorize necessary emergency medical treatment. I understand that this event is RRCA sanctioned and that bicycles, skateboards, baby joggers or strollers, roller skates or blades, and animals are not allowed in the race, and I will abide by this guideline.

Signed (if under 18 signature of parent /guardian) _____ **Date** _____

Please complete the section below if you are entering the Marathon:

Number of Completed Marathons: _____ Number of Capital City Marathons: _____
Best Previous Marathon Time: _____ Predicted Time: _____