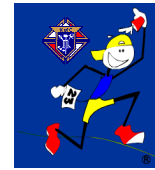




Council 3031
P.O. Box 1532
Swift Current, SK
S9H 4G3



Swift Current Knights of Columbus 4th Annual "Fathers Day Marathon"

RACE DAY: SATURDAY JUNE 20/09 - START TIME: 8:00 AM

REGISTRATION INFORMATION: Mail in Registration Form – All information is required, except where indicated (*). Incomplete forms will not be processed. One registrant per form only.

LAST NAME: _____ FIRST NAME: _____

ADDRESS: _____ PROVINCE: _____

CITY: _____ POSTAL CODE: _____

E-MAIL: _____ DAY PHONE: (____) _____

AGE AT RACE DAY: _____ GENDER: (Circle one) M F

DATE OF BIRTH: _____ PREDICTED MARATHON TIME *: _____

ENTRY FEES AND DEADLINES (Please circle the amount and run you intend to participate in)

PRE-RACE PASTA MEAL IS INCLUDED IN REGISTRATION

Type	To May 15/08	To May 31/08	After May 31/08
½ Marathon	\$55.00	\$60.00	\$70.00
10 km	\$50.00	\$55.00	\$65.00
5 km	\$35.00	\$40.00	\$50.00
5 km walk	\$30.00	\$35.00	\$45.00
Children 5 km	\$10.00	\$10.00	\$10.00

<u>T-SHIRT SIZES CHART</u>			
Please circle your T-Shirt size (T-Shirts included in registration)			
Children			
S	M	L	
Adult			
S	M	L	XL

Registration Fee Enclosed: \$ _____ . PLEASE NOTE: Fees are neither refundable nor transferable.

WAIVER

I am participating at my own risk and waive all claims of every nature against the organizers, officials, sponsors, and any other participating agencies with respect to any personal loss, illness, bodily injury or death resulting from participating in these activities. I also fully understand the rigors of such a competition and have prepared myself physically for the race. At the time of registration, I will inform the race organizers regarding any relevant medical condition. I agree to follow the rules, which govern road racing. 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.

Signature: _____ Date: _____

Signature: _____ Date: _____

Of Parent or Guardian (if under 18 years of age)

Please send registration form and payment to:
Swift Current K of C Marathon
C/O Dave Stewardson
P.O. Box 1532
Swift Current, SK. S9H 4G3

INFORMATION CORNER:
Check out our Web Site for Package pick up, meal times and other race day information. <http://www.kofcswiftcurrent.org>
Non-Participant Pasta Meals are \$ 8.00.