



# Eagle View Elementary School

## Entry Fee \$15

October 24, 2009 - Arlington, VA  
Open to kids ages 6-13



Child Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ Birthdate \_\_\_\_\_ Age on Race Day \_\_\_\_\_ Gender \_\_\_\_\_  
MM/DD/YYYY

Name of School \_\_\_\_\_

My parent is running in: Marine Corps Marathon MCM 10K

### PARENT/GUARDIAN INFORMATION

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number (\_\_\_\_) \_\_\_\_\_ Email Address \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Phone (\_\_\_\_) \_\_\_\_\_

### LIABILITY AND PUBLICITY RELEASE (MUST BE SIGNED)

For considering entry acceptance in the Marine Corps Marathon Healthy Kids Fun Run, I the undersigned, intending to be legally bound, waive and release for myself, my heirs, executor and administrators, any and all rights and claims for damages, demands and any other actions, which I may have against the US Marine Corps, US Government, National Park Service, volunteer medical support, all participating supports and those entities' representatives, successors and assignees, from my participation in the event, including any and all injuries suffered by me because of my participation in this event. I verify I have full knowledge of the rigors of this race and the risk involved in participation, and I am physically fit and have sufficiently trained to complete this event. I realize medical support for this event will consist of primarily of volunteer medical personnel prepared to administer first-aid type assistance along the race course and the finish line. I hereby grant permission to the Marine Corps Marathon and its sponsors to use all information submitted in my application, and any photograph, videotape, motion pictures, recording and any other record of this event including race results, my likeness, name and completion time for any lawful purpose related to the race and post-race publicity. Runner data may be used to offer a limited number of race enhancements. The Race Director reserves the right to reject any entry. No unauthorized bicycles or roller skates permitted during the race, headphones or other similar devices are not advised.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

### PAYMENT: \$15

Please return form and payment (make checks payable to Eagle View Elementary School) to:  
Mr. Niehoff

All entries are non-refundable, non-deferrable and non-transferable. Applications must be received by October 2, 2009 to ensure entry into the 2009 Healthy Kids Fun Run.

**FOR PACKET PICK-UP INFORMATION PLEASE VISIT  
WWW.MARINEMARATHON.COM**