

**REGISTRATION FORM**  
**FLAGSTAFF MARATHON — September 27, 2008**

Circle race type:      **Marathon** Half Marathon    10 k    Kids Kilo

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Age on Race Day      \_\_\_\_\_      Gender (circle one)      **M**    **F**

T-shirt size (circle one)      **S**      **M**      **L**      **XL**

**Registration Fee:**

\_\_\_\_\_ **Marathon**      \$75

\_\_\_\_\_ **Half-Marathon**      \$50

\_\_\_\_\_ **10K Race**      \$35

\_\_\_\_\_ **Kids Kilo**      Free

\_\_\_\_\_ **Donation for North Country Community Health Center (optional)**

\_\_\_\_\_ **Total**

**Make check payable to: Flagstaff Nordic Center**

**Mail to: Flagstaff Nordic Center, P.O. Box 1781, Flagstaff, AZ 86002**

**Flagstaff Marathon Liability Waiver for Peak Endeavors, LLC dba Flagstaff Nordic Center — Please read and sign below to agree to terms**

In consideration of myself or my child being permitted to participate in this activity, I represent that I, or my child do:

1. Acknowledge, agree and represent I fully understand the nature of running activities and races and that I am qualified, in good health, and in proper physical condition to participate in such activity.
2. Hereby agree to release, discharge and covenant not to sue the race's administrators, directors, agents, officers, members, volunteers, and employees, other participants, any sponsors, advertisers, owners and lessors of premises of property on which the Activity takes place from all liability, claims, demands, losses or damages.
3. I give permission for my or my child's name, picture or likeness from this event to appear on the Nordic Center's website, public media, and advertising related to this event.

**Entrant (parent if under 18) signature**

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