## FLORIDA GULF BEACHES ROAD RACES

Use this entry form for both the Gulf Beaches Holiday Halfathon in December and our Clearwater races in January!

Last NameFi	First Name		Date of Birth (M/D/Y)/		
Address			Day Phone ()		
CityState					
Sex: M F E-Mail (for confirmation and updates)					
Emergency Contact		Phone		T-shirt size: S M L XL XX	
<b>GULF BEACHES HOLIDA</b>	Y HALFA	THON (13	.1 MILE	S) - DECEMBER 14, 2008	
Entry Fee: Postmarked by August 31 Postmarked by October 26 Postmarked by November Postmarked by December 6	23 \$50	AGE ON 12/14 First Half Marat Wheelchair? Y Projected Finish	hon? Y N N	Early Start Walker? Y N	
On-site, December 13 - 14				ttle from the finish to the start? Y N	
CLEARWATER HA	LFATHON	1 (13.1 MI	LES) – JA	NUARY 18, 2009	
Entry Fee: Postmarked by August 31 Postmarked by September Postmarked by November Postmarked by December 2 Postmarked by January 10 On-site, January 17 - 18	9 \$45 21 \$50	AGE ON 1/18/2 First Half Marat Wheelchair? Y	hon? Y N N	Early Start Walker? Y N	
CLEARWATER 5 MILER - JANUARY 18, 2009					
Entry Fee: Postmarked by August 31 Postmarked by November Postmarked by January 10 On-site, January 17 - 18		AGE ON 1/18/2 First 5 Miler? Y Wheelchair? Y Projected Finish	N N	Early Start Walker? Y N	
I want to help the Lance Armstrong Foundation battle cancer. My tax-deductible check is made payable to the LAF.					
TOTAL DUEPlease make check or money order for entry fees payable to Gulf Beaches Road Races.  I have full knowledge of and assume the risks (heat exhaustion, heat stroke, personal injury, etc.) involved in training for and participating in the Florida Gulf Beaches Road Races (the "Races") and represent that I am physically fit and sufficiently trained to participate therein. Because you are relying on these representations and in consideration of your accepting my entry into the Races, I, for myself, my heirs, executors, administrators, personal representatives, successors and assigns, waive and release any and all rights, claims and causes of action I have or may have against the Florida Gulf Beaches Road Races, WaterCross International, Inc., the Board of County Commissioners of Pinellas County, the cities or townships of Clearwater, Madeira Beach, Redington Beach, North Redington Beach, Redington Shores, Indian Shores, Seminole and Largo, the state of Florida, USA Track & Field, any and all sponsors of the Races, their agents, employees, officers, directors, successors and assigns, jointly and separately, from and against any and all claims, actions, demands or damages which in any way arise out of or result from my training for or participating in the Races or Race related events. I hereby grant full permission to any and all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose, including commercial advertising. I UNDERSTAND THERE ARE NO REFUNDS, TRANSFERS OR CREDITS, UNLESS I REGISTER BEFORE AUGUST 1 FOR THE HOLIDAY HALFATHON OR BEFORE SEPTEMBER 14 FOR THE CLEARWATER HALFATHON AND THE CLEARWATER 5 MILER. I UNDERSTAND I MUST NOTIFY THE RACE DIRECTOR IN WRITING OR BY E-MAIL AT LEAST TWO WEEKS PRIOR TO THE RACE I ENTERED. ALL REFUNDS WILL BE ISSUED ON OR ABOUT FEBRUARY 1, 2009.					
Signature of Applicant			Date	Florida Gulf Beaches Road Races P.O. Box 47774 St. Petersburg, FL	
Signature of Parent or Legal Guardian (fo	r runners under	18 years old)	Date		