

"RUN FOR THE DIAMONDS"

OFFICIAL 2017 ENTRY FORM

Last Name	First Name	M.I.	Sex	Age on 11/23/17
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Address (Number & Street, P.O. Box, Route #)	County (PA Residents Only)
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City	State/Province	Zip Code
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Date of Birth (mm/dd/yy) - -	Telephone Number - -	Number of Diamond Runs Completed Total = Consecutive =
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Club Affiliation (for team scoring)	Best 10K	Berwick 9 Mi.	Shirt Size <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL
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Email Address	Attending High School? <input type="checkbox"/> Yes <input type="checkbox"/> No	Berwick School District Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Tri-County (Columbia, Montour, Luzerne?) <input type="checkbox"/> Yes <input type="checkbox"/> No	In an effort to reduce paperwork, do you need a copy of the entry blank mailed to you? <input type="checkbox"/> Yes <input type="checkbox"/> No
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ENTRY FEES:	ENTRY INSTRUCTIONS: Complete the entry being sure to include all requested information. Make special note of fees and deadline dates. Enter TOTAL ENCLOSED making check or money order payable to BERWICK MARATHON ASSOC., INC. and mail to:
Entry (1 Per Form) \$25.00 <input type="checkbox"/>	Berwick Marathon Association, Inc., PO Box 856, Berwick, PA 18603 Further Information: (570)759-1300
Entry after 11/11/17 \$35.00 <input type="checkbox"/>	
Pasta Dinner (each) \$10.00 <input type="checkbox"/>	
TOTAL ENCLOSED \$	

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 weather, including high heat and/or humidity, traffic and conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Berwick Marathon Association, Inc., its officers and agents, the Borough of Berwick and all other municipalities through which the "RUN FOR THE DIAMONDS" will take place, all sponsors, their representatives and successors, including the Road Runners Club of America, its officers, directors, agents and employees, 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. A physician has verified my fitness for this distance. I also give my permission for the use of my name and/or picture in any broadcast, telecast or other account of this race.

(IMPORTANT: Minors must have this application signed by parent or guardian. Incomplete, unsigned or illegible applications WILL NOT be accepted.)

Date	Signature of Runner
	Signature of Parent or Guardian (if necessary)

PLEASE NOTE: To assure accuracy of certain awards, please complete the county and high school questions above.