

# Runner's/Walker's Registration and Release Form (offline only)



Thursday, Sept. 16, 2010  
7 p.m.  
Adjacent To Turner Field

Questions? [info@KPcorporaterunwalk.com](mailto:info@KPcorporaterunwalk.com) or (404) 843-8727. Fax: (404) 252-3971

## Registration Options

- online at [KPcorporaterunwalk.com](http://KPcorporaterunwalk.com) through Wednesday, September 15, 2 p.m. **HIGHLY RECOMMENDED!**
- offline – complete this form and turn in to your company captain (Non-team individuals should make checks payable to Galloway Productions and mail to 4651 Roswell Road, #I-802, Atlanta, GA 30342 by September 10.)
- No race day registration.

Watch for walker and runner start lineup signs for your start area.

Runners will go up Hank Aaron Drive toward Fulton Street, and walkers will go over to Fraser Street, via the Gold Lot.

<input type="checkbox"/> CEO (see p. 8)	<input type="checkbox"/> Elite Runner ( <i>men-6:00/mile; women-7:00/mile, master's men-6:15/mile, master's women -7:15/mile</i> )	<input type="checkbox"/> member of Kaiser Permanente				
Include documentation here. (See p. 4 for more info)						
Last Name		First Name	Sex M F	Date of Birth	Walker	Runner
<input type="text"/>		<input type="text"/>	<input type="checkbox"/> <input type="checkbox"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>
Company Name			E-Mail Address (required to receive special offers - will not be shared/sold)			
<input type="text"/>			<input type="text"/>			
Business Address				Phone Number		
<input type="text"/>				<input type="text"/>		
City, State, Zip				County		
<input type="text"/>				<input type="text"/>		
Past Participant	New	T-shirt size	<input type="text"/>			
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				

Waiver/Release: I know that walking, running and road racing are potentially hazardous activities. By entering this event I am taking responsibility for medical clearance and for being physically fit and properly trained to participate in this event. I agree to abide by any decisions of program officials relative to my ability to safely complete the event. I assume all risks associated with running, but not limited to my own fitness and health condition, falls, contact with other participants, the effects of weather including high heat and/or humidity, traffic, and the condition of the road, all such risks being known and appreciated by me. I also agree that I may be examined and treated if necessary during the course of the race by qualified race personnel in the event medical problems of any cause arise. The race officials or the qualified personnel have the right to disqualify me and remove me from the race if, in their opinion, I may be suffering from a life-threatening condition. Having read this waiver and knowing these facts and in consideration of your accepting my application, I, for myself and anyone entitled to act on my behalf, waive and release Kaiser Permanente Health Plan, Braves Productions, Inc., Atlanta National League Baseball Club, Inc., City of Atlanta and Fulton County Recreation Authority, City of Atlanta, Georgia, Fulton County, Georgia, Imperial Parking (U.S.), Inc., Southeast Promotion Group Inc., Stephen Markow, all city officials, Phidippides Runners, JFG Ltd., Galloway Productions, Jeff Galloway, the RRCA, event volunteers, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, including without limitation any personal injuries, death or damage to my property which I may incur, even though that liability may arise out of negligence or carelessness of the persons named in this waiver and other organizations. In further consideration of my participation in this event, I hereby grant to the sp group, Phidippides Runners, and all other sponsors and persons authorized by any of them, the right to record, broadcast, photograph, and otherwise exploit in any and all media throughout the world my performance in the event and to use my name, likeness, voice and biographical information concerning me in connection therewith and such other purposes as sp group may from time to time authorize. I warrant that I am 18 years of age or older. Produced by Phidippides Runners, RRCA.

Signature \_\_\_\_\_  
(All participants must sign this waiver. If you are under the age of 18, you must have a parent's signature.)

Date \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_  
(VISA, MasterCard or AmEX only)

Amount to be charged \_\_\_\_\_

Signature \_\_\_\_\_

**Box Dinner from Jason's Deli available. Includes wrap, bag of chips, pickle spear, cookie, mustard/mayo, napkin and a bottle of water. Deadline to order is September 2.**

turkey  ham  veggie



Captains: To order for your team, call 404-617-3486.

## RETURN THIS FORM TO YOUR COMPANY CAPTAIN

### Instructions and Reminders

1. Entry fee is \$25 through August 16, 2 p.m., and \$30 after that. Reminder: entry fees are non-refundable.
2. Sign up online or complete this Runner's/Walker's Release Form, and return to your Company Captain.
3. Make sure that you receive your assigned number from your Company Captain prior to race day. If you lose or forget your number on race day, please go to the Information Tent.
4. Be sure you know where your company meeting area is on race day and whether or not your company has rented a tent.
5. As you cross the finish line, move quickly through the finish area and remember your finishing time as it appeared on the finish line clock. Report this exact time to your Company Captain.
6. Your email address will be used for occasional (infrequent) event info emails. This info will be used by Galloway Productions only and will not be shared or sold.