



Relay Form

June 3rd, 2012

Please check appropriate box:

- High School Team \$200
- Corporate Team \$500
- Massage _____ tickets at \$15 each total \$ _____
- Pre Race Pasta _____ tickets at \$15 each total \$ _____
- Total Amount Enclosed \$ _____**

Send completed form and payment to:

Marathon Registration

P O Box 431,
Port Angeles WA 98362

Checks payable to PAMA (US funds only)

Full, Half, and Kids Marathon, 10K / 5K Registration
at www.nodm.com

Registration form must be received by **April 1st**.
Race is limited and will sell out.

Team Captain

First Name _____

Last Name _____

Email (for updates) _____

Address _____

City _____ State _____

Zip/Postal Code _____

Phone (day) _____

Company or High School _____

Team Name _____

Waiver: I understand that walking or running in a road race is a potentially hazardous activity. I should not participate 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 compete. I assume all risks associated with participating in the event, including but not limited to falls, contact with other participants, the effects of weather, traffic and the condition of the road/trail, all such risks being known and appreciated by me. Having read the waiver and knowing these facts and in consideration of acceptance of my entry, I, for myself and anyone entitled to act on my behalf, waive and release Port Angeles Marathon Association, the City of Port Angeles, the City of Sequim and Clallam County, all sponsors, contractors, vendors, volunteers, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of the negligence or carelessness on the part of persons named in this waiver. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings or any other record of the event for any legitimate purpose. I also understand that my entry fee is nonrefundable. A parent must sign if an entrant is under 18 years of age. This is to certify that my child had permission to compete in the event, is in good physical condition, and the event officials may authorize necessary medical treatment. I understand that bicycles, skateboards, baby joggers or strollers, roller skates or blades, and animals are not allowed in the race due to the width and nature of the trail, and I will abide by this guideline. It is my responsibility to check the website for updates: www.nodm.com. **No refunds or transfers.**

If under 18, signature of parent/guardian is required.

Team Members (Please Print)	Gender	Shirt Size <small>(XS, S, M, L, XL, XXL)</small>	Signature
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____