

2011 REGISTRATION FORM

You can also apply online at INGMiamiMarathon.com or RunMiami.com

Check the event you are entering. Entry is **NON-REFUNDABLE AND NON-TRANSFERABLE**.

ING MIAMI	Before 07/09	Before 10/01	Before 12/10	Before 01/21	Expo	US Dollars Only
____ Marathon	\$85	\$90	\$95	\$100	\$125	\$ _____
____ Half Marathon	\$60	\$65	\$70	\$75	\$125	\$ _____
Senior Discount (take \$5.00 off if over 60 years old)						\$ (_____)
					Total Enclosed:	\$ _____

Wheelchair Participants
____ Pushrim Division
____ Ambulatory Disabled
Handcrank athletes must register through Achilles at Achillesinternational.org

In order to compete you must be in good health and physically prepared to take on the challenges of the event you register for. Coaches, skateboards, baby joggers, bikes and animals are prohibited on the course. You must wear an official race number, and be able to complete the marathon in 6 hours or the half marathon in 3.5 hours. Mail-in registration must be postmarked 1/17/2011. Online registration closes 1/21/2011. **Photo ID is required for packet pick-up.** If you are unable to pick up your packet yourself, a *non-participant packet pick-up form* is available online. **NO RACE DAY REGISTRATION. NO RACE DAY PACKET PICK-UP.**

TROPICAL 5K	Through 12/9	12/10 - 1/21	Expo	US Dollars Only
____ Tropical 5K	\$20	\$25	\$30	\$ _____

Wheelchair Participants
____ Pushrim Division
____ Ambulatory Disabled

In order to compete you must be in good health and physically prepared to take on the challenges of the event you register for. Race numbers and timing tags for the 5K MAY NOT be used for the marathon or half marathon. Coaches, skateboards, bikes and animals are prohibited on the course. Mail-in registration must be postmarked 1/17/2011. Online registration closes 1/21/2011. **NO RACE DAY REGISTRATION.** If space is available, walk-up registration will be open at the Nissan Health & Fitness Expo presented by The Miami Herald / El Nuevo Herald only on Friday January 28th.

ALL RACES ARE SUBJECT TO CAPACITY LIMITS AND MAY CLOSE AT ANY TIME.

Information

Last Name: _____	First Name: _____	Preferred Name on Bib: _____ <small>(10 letter max, only if registered by 11/19/10)</small>
Mailing Address: _____	City: _____	State: _____ Zip: _____
Country: _____	Citizenship: _____	Sex: M F Date of Birth: <u>MM</u> / <u>DD</u> / <u>YYYY</u> T-Shirt Size: XS S M L XL XXL <small>(circle one)</small>
Email: _____	ING Miami Marathon & Half Marathon®: Age on 01/30/11: _____	Tropical 5K: Age on 01/29/11: _____ <small>(*must be 16 for marathon and 14 for half)</small>
Estimated Finish Time: Hr _____ Min _____	Home Phone Number: (_____) _____	Cell Phone Number: (_____) _____ <small>(required for marathon & half marathon)</small>
Would you like to receive US Road Sports updates via text message? YES NO (circle one)		*If younger, an additional waiver must be signed at packet pick-up

Marathon Seeded Numbers - Proof Required (please submit with this application)	Qualifying Time
If your entry has been postmarked by 12/26/10 and submitted with proof (copy of race results, certificate or finisher's postcard) of having completed a marathon since 01/01/09 in a time faster than those listed, you will be considered for a seeded number. Seeded numbers are not guaranteed.	Men - 03:10:00 Women - 03:45:00
	Hr _____ Min _____ Sec _____

Mail completed entry form with fee payable by check or money order in US Dollars to:
Must be postmarked by: January 17, 2011
US Road Sports & Entertainment of Florida, LLC
Attn: Registration
PO Box 56-1081
Miami, FL 33256



Waiver - Required

All participants in the ING Miami Marathon and Half Marathon, Tropical 5K and related marathon weekend events (collectively the "events") are required to assume all risk of participation in the events by signing this general release agreement: The undersigned athlete (Athlete) and on behalf of Athlete's personal representatives, assigns, heirs, and executors, fully and forever releases from all liability, including negligence, the City of Miami and City of Miami Beach, Miami-Dade County, ING Miami Marathon and Half Marathon, the Tropical 5K, USATF, ING, US Road Sports & Entertainment of Florida, LLC, US Road Sports & Entertainment Group, LP and each of its respective past, present and future shareholders, directors, officers, members, managers, employees, agents, parents, subsidiaries, affiliates, successors and assigns, all municipal agencies whose property or personnel are used, and all other sponsoring or co-sponsoring companies or individuals related to the events (collectively Releasees). Athlete and on behalf of Athlete's personal representatives, assigns, heirs and executors waives the right to sue Releasees for all losses and damages that arise from any injury to Athlete or Athlete's property or resulting in Athlete's death in connection with the Athlete's participation in the events including but not limited to losses or damage caused by the negligence of all or any of the Releasees or otherwise, and also including any pre or post-race activities and any programs and/or giveaways conducted at the events/activities by a sponsor or other third party. The Athlete warrants that Athlete is in good physical condition and is able to safely participate in the events. The Athlete is fully aware of the risks and hazard inherent in participating in the events and elects to voluntarily compete in the events knowing such risks. The Athlete agrees to the use of Athlete's name and photograph in broadcasts, newspapers, brochures, and other media without compensation. The Athlete acknowledges that the entry fee is non-refundable and non-transferable. The Athlete grants to the Medical Director of the events and the University of Miami Medical Group and its agents, affiliates, and designees access to all medical records (and physicians) as needed and authorize medical treatment as needed.

The Athlete acknowledges that US Road Sports & Entertainment of Florida, LLC has the right to alter, change, cancel and/or postpone any of these events as a result of circumstances that would affect or impact the event which are beyond their control. The Athlete warrants that all statements made in this release agreement are true and correct and understands that Releasees have relied on them in allowing Athlete to participate in the events. Athlete has read the foregoing and intentionally and voluntarily certifies compliance by accepting this waiver. If athlete is under age 18: The undersigned certifies that my son/daughter has my permission to participate in the events. The undersigned has read the foregoing release and waiver of liability agreement (above) and by signing below intentionally and voluntarily agrees to its terms and conditions. The undersigned further certifies that my son/daughter is in good physical condition and is able to safely participate in the events. I hereby authorize medical treatment for him/her and grant access to my child's medical records as necessary.

Signature of Applicant _____ Date _____ Signature of Parent or Legal Guardian (if applicant is under 18) _____ Date _____