

INSTRUCTIONS:

1. Complete form
2. Mail completed form and entry fees to the address at the bottom of the page.

I am a Pace Bunny

Expected Finishing Time: _____ : _____
Hours Minutes

PLEASE CHECK ONE:

Marathon Half-Marathon Half Marathon Walk 10k 5k Run 5k Walk

First Name: _____ Last Name: _____

Sex (M/F): _____ Age: _____ (On Race Day May 1/16) Shirt Size: XS S M L XL

Address: _____ Apt#: _____ City/Town: _____

Province/State: _____ Postal/Zip: _____ Country: _____ Email: _____

Day Phone: _____ Ext: _____

Please let us know if you have any medical conditions that we should be aware of:

ENTRY FEES (NO REFUND ON ENTRY FEES) – 13% HST IS INCLUDED

	By July 31/15	By Jan 31/16	By Mar 31/16	By Apr 27/16	At Expo
Marathon	\$101.70	\$113.00	\$118.65	\$124.30	\$130.00
Half Marathon	\$84.75	\$96.05	\$96.05	\$101.70	\$110.00
10k	\$50.85	\$56.50	\$62.15	\$67.80	\$75.00
5k	\$39.55	\$50.85	\$56.50	\$62.15	\$70.00

Register online to save money! www.torontomarathon.com

For information on Relay Teams, please go to Relay info on our website or call (416) 920-3466.

BUS TRANSPORTATION (\$16.95) - Please check if you require transportation to the Start Line.

Hilton Ontario Place

(Available to participants in the Marathon or Half-Marathon only.)

Tickets are not available at the expo. Participants must show bib to board.

Visit <http://www.TorontoMarathon.com> for detailed information regarding pick-up locations and times.)



Please make cheques/money orders payable in Canadian Funds (foreign entrants in U.S. funds only) to:

Running First Ltd, PO Box 1240, Uxbridge, ON L9P 1N5

If written confirmation is required please include a stamped self-addressed envelope.

By including your email address above, an electronic confirmation will be emailed to you upon receipt.

IN CONSIDERATION of the acceptance of my application and the permission to participate as an entrant, competitor or volunteer in the GoodLife Fitness Toronto Marathon and any or all of the following events: the Half-Marathon, Relay, 5K, Post-Race Activities on Sunday May 1st, 2016 and any other 2016 GoodLife Fitness Toronto Marathon activities that take place prior to or after the event, including the use of my photograph/picture for marathon promotional purposes. I, for myself my heirs, executors, administrators, successors and assigns, HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the City of Toronto, The Toronto Board of Commissioners of Police, The Toronto Police, The Toronto Auxiliary Police Force, The Chief of Police, The Toronto Transit Commission, The Ministry of Transportation of Ontario, Athletics Ontario, Athletics Canada, Sidan Traffic Control Services, GoodLife Fitness Centres Inc., Loblaw Inc., Running Room Canada Inc., Princess Margaret Hospital Foundation, University Hospital Network, and their volunteers and employees, All sponsors and contributors, Running First Ltd., Jay Glassman, The GoodLife Fitness Toronto Marathon Organizing Committee, and all other associations, sanctioning bodies and sponsoring companies, and all their respective agents, officials, servants, contractors, representatives, elected and appointed officials, successors and assigns OF AND FROM ALL claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity in respect of death, injury, loss or damage to my person or property HOWEVER CAUSED, arising or to arise by reason of my participation in the said event, whether as a spectator, participant, competitor, volunteer or otherwise, whether prior to, during or subsequent to the event, AND NOTWITHSTANDING that same may have been contributed to, or occasioned by, the negligence of any of the aforesaid. I FURTHER HEREBY UNDERTAKE to HOLD AND SAVE HARMLESS and AGREE TO INDEMNIFY all of the aforesaid from and against any and all liability incurred by all of them as a result of, or in any way connected with, my participation in the said event. BY SUBMITTING THIS ENTRY I ACKNOWLEDGE HAVING READ, UNDERSTOOD AND AGREED TO THE ABOVE WAIVER, RELEASE AND INDEMNITY I WARRANT that I am physically fit to participate in this event.

PRINT NAME: _____

SIGNATURE: _____ **DATE:** _____

BEST MARATHON TIME: _____ **DATE (month/day/year):** _____ **CITY:** _____

No persons under age 18 will be permitted to participate in the full marathon. No persons under age 16 will be permitted to participate in the half marathon.