MISSISSAUGA MARATHON
RACE WEEKEND WARRIOR REGISTRATION FORM

REGISTRATION CLOSES WEDNESDAY, MAY 2nd, 2018 AT 5:00 PM.
REGISTER BEFORE SUNDAY, APRIL 22nd, 2018 AT 11:59 PM TO HAVE YOUR FIRST NAME PRINTED ON YOUR BIB.

SELECT YOUR EVENTS:

SATURDAY, MAY 5th:

___ Novo Nordisk® "Hazel" 5KM
___ MNP 10KM **Run**
___ MNP 10KM **Walk**

SUNDAY, MAY 6th:

___ Full Marathon
___ Half Marathon **Run**
___ Half Marathon **Walk**
(___) I am participating in the **Sal Guzzo, LL.B. Relay Challenge**
Team Name:_____

List of Events	by Nov. 1	HST	by Feb. 8	HST	by Mar. 29	HST	by May 3	HST	At Expo	HST
Full Marathon	$85.00	$11.05	$95.00	$12.35	$100.00	$13.00	$105.00	$13.65	$120.00	$15.60
Half Marathon	$70.00	$9.10	$80.00	$10.40	$85.00	$11.05	$90.00	$11.70	$105.00	$13.65
MNP 10KM	$45.00	$5.85	$50.00	$6.50	$55.00	$7.15	$60.00	$7.80	$75.00	$9.75
Novo Nordisk® "Hazel" 5KM	$40.00	$5.20	$45.00	$5.85	$50.00	$6.50	$55.00	$7.15	$70.00	$9.10

SATURDAY ENTRY FEE = $ _____
SATURDAY HST (13%) = $ _____
SATURDAY iTaB ($10.00) = $ _____
SATURDAY FEES = $ _____

SUNDAY ENTRY FEE = $_____
SUNDAY HST (13%) = $_____
SUNDAY iTaB ($10.00) = $_____
SUNDAY FEES = $_____

TOTAL FEES = $_____

CHEQUES PAYABLE TO: Mississauga Marathon

Last Name _____ First Name _____

Address _____ Apt./Suite _____

Town/City _____ Prov./State _____ Postal Code _____Country_____

Home Phone #_____ Office Phone # _____**Email**_____

D.O.B. (DD/MM/YY) __ __ / __ __ / __ __ __ __ Age on Race Day_____ Gender: Male ◯ Female ◯

Health Conditions /Allergies_____

Would you like to personalize your medal with your name and finish time using the Personalized Medal feature for $10.00?
* If you would like an iTaB for only 1 event, please indicate which event that you would like the iTaB for.
If you select yes, please add an additional $10.00 to your registration fee. Yes ☐ No ☐

I give permission for Landmark Sport Group to contact me via email, for event details. Yes ◯ No ◯

Waiver, Release & Indemnification

In consideration of the acceptance of my application and the permission to participate as a volunteer or competitor in the Mississauga Marathon, in any or all of the following events: the Full Marathon, Sal Guzzo LL,B. Relay Challenge, Half Marathon, MNP 10KM, 10KM Student Relay, Novo Nordisk® "Hazel" 5KM, 2KM Fun Run/Walk, post-race activities on Saturday, May 5th and Sunday, May 6th, 2018 and any other 2018 Mississauga Marathon activities that take place prior to or after the event. I, for myself my heirs, executors, administrators, successors and assigns, hereby release, waive and forever discharge The City of Mississauga, the Peel Regional Police, the Chief of Police, the Mississauga Transit Commission, the Ministry of Transportation of Ontario, all sponsors and contributors, Landmark Sport Group Inc. and its employees and volunteers, the Mississauga 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. When you participate in any event or volunteer during the 2018 Mississauga Marathon, the staff has the right to use your image for promotional and marketable purposes. 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 assist/participate in this event.

_____

Print Name Signature or Parent/Legal Guardian Signature (under 18 years of age) Date

ALL ENTRIES ARE NON-REFUNDABLE & NON-TRANSFERABLE

All forms with payment **MUST BE RECEIVED** by the price increase date to pay that specific price.

Mississauga Marathon, Landmark Sport Group Inc., 5500 Rose Cherry Place, Mississauga, ON, L4Z 4B6
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