The 48th Charleston Distance Run

15 Mile Race, 3-Person 15 Mile Relay and 5k Run/Walk

Saturday, September 5, 2020, 7:30 a.m. • Charleston, West Virginia

Send Payment to:
Charleston Distance Run
PO Box 11595
Charleston, WV 25339

☆ U.S. MILITARY ENTRY FORM ☆

MUST USE THIS ENTRY FORM, NOT ONLINE REGISTRATION

For active military personnel, reservists and retirees. Does not apply to family members.

$25 for all events when received by August 1, 2020's mail.

$35 for all events from August 1, 2020 until September 3, 2020's mail.

$40 at the Beni Kedem Temple next to the Civic Center from 3 to 8 p.m. on September 4, 2020.

For race details: www.charlestondistancerun.com

— NO REFUNDS ON ANY FEES —

Check appropriate event: 15 Mile Race ❑ 3-Person 15 Mile Relay ❑ 5k Run/Walk ❑

PLEASE PRINT CLEARLY

LAST NAME FIRST NAME

ADDRESS 1

ADDRESS 2

CITY STATE ZIP CODE

( ) CELL OR HOME PHONE

E-MAIL

Required Information

Male _____

Female _____

AGE ON 9/5/2020 _____

DATE OF BIRTH ___/___/_____ MM/DD/YY

Participant must fill out the above information.

Short Sleeve T-Shirt (Free) Size (Circle One) Small Medium Large X Large XX Large XXX Large

OPTIONAL Souvenir Shirt: **(Please include payment with entry fee)** Standard Sizes S M L XL XXL XXXL

$15/each Short Sleeve (indicate size _____ & quantity _____) $20/each Long Sleeve (indicate size _____ & quantity _____)

OPTIONAL: **Until August 1, 2020**

Sport Tec 1/4-Zip Stretch Polyester Pullover: $45/each **(Please include payment with entry fee)**

Male Size:	(Circle One)	S (35-37)	M (38-40)	L (41-43)	XL (44-46)	XXL (47-49)	XXXL (50-51)
Female Size:	(Circle One)	S (4/6)	M (8/10)	L (12/14)	XL (16/18)	XXL (20/22)	XXXL (24/26)
Available Colors:	(Circle One)	Black	True Royal	True Red	Heather Grey		

Circle one : INDIVIDUAL WHEELCHAIR / HANDCYCLE 3-PERSON 15 MILE RELAY

IF 3-PERSON 15 MILE RELAY (Circle one): FEMALE MALE CO-ED

NAME OF TEAM: _____

WAIVER : I, the undersigned, waive and release for myself, my heirs, executors, and administrators, any and all rights and claims for damages, demands, and any other actions whatsoever, which I may have against Charleston Distance Run, Inc., its committee members and volunteers, the City of Charleston, all participating sponsors and supporters of those entities, successors, representatives, and assigns, arising out of my participation in this event, including any and all injuries, including death, suffered by me as a result of my participation in this event. I consider myself adequately trained for the completion of this event. Should I suffer an injury or illness, I authorize officials of this race to use their discretion to have me medically treated and transported to a medical facility. I also authorize Charleston Distance Run, Inc. to use any photograph or video taken of me during any of the Charleston Distance Run events to be used in any promotional materials.

X _____

SIGNATURE (Parent or Guardian MUST sign if under 18)

__/__/__ DATE

www.charlestondistancerun.com