

2019 Mile at the Pines Registration Form (one per runner)

Race Fee \$20 postmarked by July 7

First Name _____ Last Name _____

Address _____ City _____ State _____

Postal Code _____ Email _____

Sex: M F Birthday _____ / _____ / _____ Age on race day _____

Phone _____ Provider (if phone is cellular) _____

Emergency Contact _____ Emergency Phone Number _____

Select the Wave you will run or walk (pick ONE wave)

- | | |
|--|--|
| <input type="checkbox"/> Youth male wave (age 17 & under) | <input type="checkbox"/> Youth female wave (age 17 & under) |
| <input type="checkbox"/> Community mile wave (non-competitive; age 5 & up.
Walkers should select this wave) | <input type="checkbox"/> Female open wave (age 18 to 39) |
| <input type="checkbox"/> Male open wave (age 18 to 39) | <input type="checkbox"/> Female masters wave (age 40 and older) |
| <input type="checkbox"/> Male masters wave (age 40 and older) | <input type="checkbox"/> Elite female wave (any age but must be able to run
sub 6:00-minute mile) |
| <input type="checkbox"/> Elite male wave (any age but must be able to run
sub 5:00-minute mile) | |

Estimated finish time (in minutes and seconds): : Are You Active or Retired Military? Yes No Are you a University of Illinois alumnus/a? Yes No

With what school are you affiliated (as a student, teacher, or administrator)? _____

Things to remember

- Online registration closes at midnight on Sunday, July 7.
- Packet pick-up is available at Body n' Sole, 1317 N Dunlap Ave, Savoy on Thursday, July 11, and Friday, July 12, from 4:00 p.m. to 7:00 p.m. and on Saturday, July 13 from 10:00 a.m. to 5:00 p.m.
- Packet pick-up and additional walk-up registrations available on race day, Sunday, July 14, between 4:30 and 5:30 only in Suite G at the Pine Shopping Center.
- The race staging area is at The Pines Shopping Center, corner of Philo and Windsor roads in Urbana.
- Race fee is non-refundable, and race numbers are non-transferable.
- Registration fee includes race-logged beach towel and bountiful post-race refreshments.

Waiver: In consideration of the acceptance of this entry, I hereby, for myself and my heirs, executors, and administrators, waive any and all right, claims, and damages. I may have against the C-U Marathon, LLC, the sponsors, the City of Urbana, and any individuals associated with said event. Also none of the above is responsible for either the loss of personal items or any aggravation in connection with said event. I also give permission for the free use of my name and picture in any broadcast, telecast, or print or digital media account of this event. In filling out this form, I acknowledge that I have read and fully understand my own liability and do accept the restrictions.

Signature _____ Date _____ / _____ / _____

Race fee: \$20.00 • Paper registration processing fee: \$2.00 • Total enclosed: \$22

Make check payable to C-U Marathon, LLC. Mail registration and payment to Mile at the Pines, c/o Illinois Marathon, PO Box 262, Champaign IL 61824