



Hyannis Marathon, Half Marathon, and 10K

February 26, 2017

Pease check ONE box below:

On or before 1/15/17

- Marathon: \$66.48 (\$65 + \$1.48 insurance fee)
- Marathon Early Start (5 hr+ finish time only): \$66.48 (\$65 + \$1.48 ins. fee)
- Half Marathon: \$58.36 (\$57 + \$1.36 insurance fee)
- 10Km: \$51.25 (\$50 + \$1.25 insurance fee)

After 1/15/17

- Marathon: \$71.55 (\$70 + 1.55 insurance fee)
- Marathon Early Start (5 hr+ finish time only): \$66.48 (\$65 + \$1.48 ins. fee)
- Half Marathon: \$63.43 (\$62 + \$1.43 insurance fee)
- 10Km: \$56.33 (\$55 + \$1.33 insurance fee)

*** DO NOT MAIL OUT AFTER 2/15/17 ***

imATHLETE will provide a full refund of your registration fee to you should this event be canceled or postponed for a covered reason and not rescheduled within 90 days. Learn more about your refund coverage at <http://help.imathlete.com>

Your Name: _____

Address: _____

Town/State & Zip Code: _____

Phone Number: _____ E-Mail Address: _____

Weight: _____ DOB ____/____/____ Age (on day of race): _____ Sex: _____

Tee Shirt Preference (circle one): Men's Women's Size (XS-XXL): _____

Emergency Contact Name : _____ Phone Number : _____

Club You Belong To For Half Marathon Team Scoring (NO INITIALS): _____

Are You Member Of The 50 State & DC Club (Please Circle): Yes No

Sheraton Hyannis Marathon Early Start (Please Circle): Yes No

Expected Marathon Time:

Saturday Buffet Pasta Dinner (please circle): YES NO The fee for this is: \$17.00

Include the merchandise you are purchasing in the below boxes - include size & amount:

Merchandise Item: _____

Discount Code: _____ Total Amount Enclosed:\$_____

WAIVER: In consideration of the acceptance of this entry I intend to be legally bound, hereby for myself, my heirs, executors and administrators waive and release any and all claims for personal damage I may have against Barnstable County, Town of Barnstable where the event is being held in, including all organizers, B.A. Event Promotions, Paul Collyer, sponsors of the race including the Resort & Conference Center of Hyannis, all volunteer groups, imATHLETE, and I attest and verify that I am physically fit and sufficiently trained for this event on February 26, 2017. I also understand that I must pick up at the race exposition on Saturday and Sunday of race weekend any merchandise I am ordering at the merchandise booth-and that I will not expect the race organizers to mail to me because I could not attend or I neglected to pick up. I also understand that B.A. Event Promotions will not issue any refunds for this event, but that imATHLETE will provide a full refund of my registration fee should this event be cancelled or postponed for a covered reason and not rescheduled within 90 days.

STROLLERS ARE NOT ALLOWED; HOWEVER, RACING WHEELCHAIRS ARE.

Signature /Signature of parent if under 18

Date:_____

All spaces must be filled out, or application will not be accepted.

Please address all checks and money orders to: B.A. Event Promotions
and mail to: B.A. Event Promotions P.O. Box 2184, Hyannis, Massachusetts 02601