I Ran Marathons Training Program Application

Mail Completed application and check to: Parvaneh Moayedi 507 BOSQUE VISTA San Antonio, TX 78258

Circle One	Price	Start Date	Finish Date		
One Year Training Program	\$450				
Six Month Training Program	\$250				
Couch to 5K Six Month	\$200				
One Year Online Membership	\$50				
Additional Donation					
Total =					

Name:	Address:			
City:	State: Zip:Phone #:			
Email address:				
How month month	hang / half manathang / ultrag have you run?			

How many marathons / half marathons / ultras have you run?_____ Gender: Male / Female____ Age: ____T-Shirt Size: Small_Medium_Large_X-Large

You must sign waiver and send in with your application

Waiver: Before starting an exercise training program it is very important to ensure that you are not in a health risk category. Evaluation by your doctor is recommended before starting. Always back off any exercise when you feel any risk of injury or health. All participants in the I Ran Marathons assume all risk of participation in the event by signing the release agreement. I the undersigned athlete on behalf of myself and on behalf of my heirs, my executors, my administrators and my trustees, waive and release any and all rights and claims for any loss (es), injuries and damages including, but not limited to demands or actions for negligence, premises liability, emotional injury, Intentional conduct, tort claims, and any other actions or demands of whatever nature, I have or may have against 1) I Ran Marathons , 2) its officials, agents and representatives, 3) all sponsors of the event in which I may participate whether my participation is as a contestant or as a spectator. I acknowledge that I am aware of the inherent risks involved in this event and I voluntarily assume the risks. I attest and verify that I am physically fit and I have sufficiently trained for the competition of the above-mentioned event in which I participate. I hereby grant full permission to any and all of the foregoing to use my name, and/or my picture in any account of this event for any purpose whatsoever. I have read the entry information provided for the event and certify my compliance by signing below. Athlete acknowledges that the entry fee is non-refundable and non-transferable.

Signature of athlete	Da	ate	
	* Signature of parent/guardian		
D	ate	*(if athlete is	
under 18) I certify that my son/daughter ha	s my permission to compete in	the I Ran Marathons is in good physica	al
condition and that race officials have my pe	ermission to authorize emergen	cy care if necessary.	