



Fax application to:
 Chicago Area Runners Association.
 Attn: Kristina Olkowski
 Fax: 312.781.1736

Registration Form Out of the Darkness Marathon Team
 CARA's 2010 Bank of America Chicago Marathon Training Program

Name _____ CARA # _____

Address _____

City, ST, ZIP _____

Home Phone _____ Work Phone _____

E-Mail _____

Gender () M () F Birth Date _____ Charity AFSP Out of the Darkness

Training Pace: 7:00 7:30 8:00 8:30 9:00 9:30 10:00 10:30 11:00 11:30 12:00
 Run/Walk (Downtown, Lincoln Park, Oak Forest, & Wheaton ONLY)

Shirt Size: XS S M L XL XXL

Location:

- () Chicago - Downtown
- () Chicago - Downtown
- () Chicago - Lincoln Park
- () Chicago - Lincoln Park
- () Chicago - Lincoln Park
- () Chicago - Lincoln Park
- () Libertyville
- () Niles
- () Oak Forest
- () Oak Forest
- () Western Springs
- () Wheaton
- () Wheaton

Session:

- Saturdays - 6:00 am
- Saturdays - 6:00 am Run/Walk Program
- Saturdays - 6:00 am
- Saturdays - 6:30 am
- Saturdays - 6:30 am Run/Walk Program
- Sundays - 6:30 am
- Saturdays - 6:45 am
- Saturdays - 7:00 am
- Saturdays - 6:50 am
- Saturdays - 6:50 am Run/Walk Program
- Saturdays - 7:00 am
- Saturdays - 6:45 am
- Saturdays - 6:45 am Run/Walk Program

CARA Marathon Training & Membership – Join CARA and SAVE

1-year Individual Membership & Charity Marathon Training - \$166

\$166

Grand Total: _____

Payment Method (make checks payable to CARA)

Circle one: Cash Check VISA MasterCard Discover AmEx
 Credit Card # _____ Exp _____ Sec Code _____

Please Note - NO PRORATES apply and NO REFUNDS can be issued for any reason, including injury, after a program begins. REGISTRATION IS NOT TRANSFERABLE. You cannot give your registration to another person. Registration fees must be paid before a program begins. Entry fee to the Bank of America Chicago Marathon is **NOT** included with the program fee. You must be 18 years or older to participate in CARA training programs.

Waiver (you must sign the waiver below)

In consideration of being permitted to participate in CARA's Training Programs, I do hereby, for myself and heirs and personal representatives, release and discharge the Chicago Area Runners Association, Bank of America, The Bank of America Chicago Marathon, Chicago Park District, Gatorade, NovaCare Rehabilitation, Goose Island Brewery, Fleet Feet Sports, and their affiliates, agents, employees, officers, directors, successors, assigns and all other persons connected with this program, from any and all liabilities on account of any injury, death or damage growing out of my participation, whether caused by their negligence or otherwise. I hereby grant full permission to any and all of the foregoing to use any photographs, motion pictures, recordings or any other record of this program for any legitimate purpose, without monetary payment to me. I am physically fit and sufficiently trained to participate in this program and recognize the risks involved, and intend by this release to assume full responsibility for anything that might happen to me.

Signature _____ Date _____