



# Saturday, October 18, 2014

Race begins at 7a.m. on MSU Campus

## Race Proceeds Benefit:

~ Oktibbeha County Volunteer Fire Departments ~ OSERVS ~  
 ~ Salvation Army Emergency Disaster Service ~

Please check ONE box below:

**Half Marathon**  
 \$55 until 8/18/14  
 \$65 until 9/18/14  
 \$75 after 9/18/14

**5K**  
 \$20 until 9/18/14  
 \$25 after 9/18/14

**Family Fun Run**  
 \$5

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 E-Mail: \_\_\_\_\_  
 DOB: \_\_\_\_\_ Age on Race Day: \_\_\_\_\_ Gender: \_\_\_\_\_  
 Telephone #: \_\_\_\_\_ Shirt Size: S/M/L/XL (gender specific)

Make Checks Payable to: CERT

Mail Registration Form to:

MSU CERT PREPARATHON

Attn: MSU CERT Coordinator Dr. Ryan Akers

Box 9745

Mississippi State, MS 39762

T-Shirt guaranteed on race day if registration for 1/2 Marathon or 5K is received by October 8<sup>th</sup>

**Do not mail after October 10<sup>th</sup>**

FOR MORE INFORMATION: [PREPARATHON@GMAIL.COM](mailto:PREPARATHON@GMAIL.COM) OR [CERT.MSSTATE.EDU](http://CERT.MSSTATE.EDU)

Waiver: In consideration of your accepting this entry, I, the below signed, intending to be legally bound, for myself, my heirs, my executors and administrators, waive and release and any all rights and claims for damages I may have against the race, and sponsors and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest that I will participate in this event as a footrace, that I am physically fit and sufficiently trained for the completion of this event. Furthermore, I hereby grant full permission to use my name and likeness, as well as any photographs and any record of this event in which I may appear for any legitimate purpose, including advertising and promotion.

\_\_\_\_\_  
 DATE: \_\_\_\_\_

SIGNATURE OF PARTICIPANT/SIGNATURE OF PARENT IF UNDER 18

OFFICE USE: CHECK # \_\_\_\_\_ AMOUNT \$ \_\_\_\_\_ RACE # \_\_\_\_\_