

Race Date:

Frank Maier Marathon



Juneau Trail and Road Runners is an affiliate member of the Road Runners Club of America.

Saturday August 01 1992

Warathon (26.2 miles) Fyolunteer - \$0 Kids 18 & Under -	Start Time:	me: 07:00AM (Registration 06:15AM)	
poin JTRR https://southeastroadrunners.org/ results online: https://jtrr.org/event/1992/race/506 Course Description: Marathon, city year certified, 8 finishers ENTRY FORM ENTRY FE Kids 18 & Under- Adults Day of Race - Juneau Trail and Road Runners Last Name GENDER CIRCLE ONE (Male Female Non-Binary) email JTRR MEMBER: (YES NO) (if yes, skip phone, address MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WMVER: Inow that running or volunteering to work in this race is a potentially hazardous activity which could cause injury or death. I will not enter and participate unless I am medically able and pr	Location:	,	
join JTRR https://southeastroadrunners.org/ results online: https://jtrr.org/event/1992/race/506 Course Description: Marathon, city year certified, 8 finishers ENTRY FORM ENTRY FE Marathon (26.2 miles) volunteer - \$0 SPONSORED BY Juneau Trail and Road Runners Last Name GENDER CIRCLE ONE (Male Female Non-Binary) email JTRR MEMBER: (YES NO) (if yes, skip phone, address MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WMVEE: Ilrow that running or volunteering to workin this race is a potentially rhazardous activity, which could cause injury or death. I will not enter and participate urless I am medically able and pr	Race Contact: DefaultRaceDirector Unassigned		signed
Course Description: Marathon, city year certified, 8 finishers ENTRY FORM ENTRY FE Marathon (26.2 miles) volunteer - \$0 SPONSORED BY Juneau Trail and Road Runners Last Name GENDER CIRCLE ONE (Male Female Non-Binary) email JTRR MEMBER: (YES NO) (if yes, skip phone, address) MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WAVER: I know that running or volunteering to work in this race is a potentially hazardous activity which could cause injury or death. I will not enter and participate unless I am medically able and pr		none	
Distance	join JTRR https://southeastroadrunn	ners.org/ results online: https://jtrr.org/e	event/1992/race/506
Distance Marathon (26.2 miles) volunteer - \$0	Course Description:		
Marathon (26.2 miles) □ volunteer - \$0 SPONSORED BY Adults Day of Race - Juneau Trail and Road Runners Last Name GENDER CIRCLE ONE (Male Female Non-Binary) email JTRR MEMBER: (YES NO) (if yes, skip phone, address) MAILING ADDRESS STREET OR BOX CITY PHONE STATE VVAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity which could cause injury or death. I will not enter and participate unless I am medically able and principals.	Marathon, city year certified, 8 finishers	S	
SPONSORED BY Adults Day of Race - Juneau Trail and Road Runners Last Name First Name GENDER CIRCLE ONE (Male Female Non-Binary) Age on 7/1/1992 email JTRR MEMBER: (YES NO) (if yes, skip phone, address MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity which could cause injury or death. I will not enter and participate unless I am medically able and pr		ENTRY FORM	ENTRY FEES
Juneau Trail and Road Runners Last Name First Name Age on 7/1/1992 email JTRR MEMBER: (YES NO) (if yes, skip phone, address) MAILING ADDRESS STREET OR BOX PHONE STATE ZIP WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity which could cause injury or death. I will not enter and participate unless I am medically able and pr	•		Kids 18 & Under - \$0
Last Name First Name Age on 7/1/1992 JTRR MEMBER: (YES NO) (if yes, skip phone,address) MAILING ADDRESS STREET OR BOX PHONE ZIP			Adults Day of Race - \$0
GENDER CIRCLE ONE (Male Female Non-Binary) email JTRR MEMBER: (YES NO) (if yes, skip phone, address) MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and principate			
email JTRR MEMBER: (YES NO) (if yes, skip phone,address MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and pr		First Name	· · · · · · · · · · · · · · · · · · ·
MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and provided the could cause injury or death. I will not enter and participate unless I am medically able and provided the could cause injury or death. I will not enter and participate unless I am medically able and provided the could cause injury or death.			
MAILING ADDRESS STREET OR BOX CITY PHONE STATE ZIP WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and pr	email	JTRR MEMBER: (YES	(NO) (if yes, skip phone,address)
CITY			
CITY	STREET OR BOX		
STATE ZIP	СПҮ	PHONE	
WAIVER: I know that running or volunteering to work in this race is a potentially hazardous activity which could cause injury or death. I will not enter and participate unless I am medically able and pr	STATE		
participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I at all risks associated with running or volunteering in this event, including but not limited to: falls, physical contact with and/or the potential contraction of a communicable disease from other participation of the road and/or trail including surrounding terrain. I understand that bicycles, skateboards, roller skates or inline skates, animals, and personal music players are not allowed in the and I will abide by all race rules. If allowed by the Race Director, and if I am pushing a baby jogger or stroller, I also accept the responsibility for injury up to death of the child being transported jogger or stroller. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Junnea and Road Runners, the United States Forest Service, the state of Alaska, the City and Borough of Juneau, and the Road Runners Club of America, all event sponsors, their representative successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons nar this waiver. In addition, I acknowledge the contagious nature of communicable diseases and voluntarily assume the risk that I may be exposed to or infected by communicable diseases by participat this event. I acknowledge that such exposure or infection may result in personal injury illness, permanent disability, and/or death. I grant permission to all of the foregoing to use my photographs, n pictures, recordings or anyother record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I conthal I am not entitled to a refund if the event i	trained, and by my signature, I certify that I am medically able to per participation in this event, including the right of any official to deny call risks associated with running or volunteering in this event, includuraters, race personnel, contract service providers, employees, the conditions of the road and/or trail including surrounding terrain and I will abide by all race rules. If allowed by the Race Director, a jogger or stroller. Having read this waiver and knowing these facts and Road Runners, the United States Forest Service, the state successors from all claims or liabilities of any kind arising out of in this waiver. In addition, I acknowledge the contagious nature of contise event. I acknowledge that such exposure or infection may result pictures, recordings or anyother record of this event for any legitims	a potentially hazardous activity which could cause injury or death. I will not from this event, am in good health, and am properly trained. I agree to ab or suspend my participation for any reason whatsoever. I attest that I have luding but not limited to: falls, physical contact with and/or the potential c and spectators. I assume all risks including: the effects of the weather; hin. I understand that bicycles, skateboards, roller skates or inline skates, ar and if I am pushing a baby jogger or stroller; I also accept the responsis a and inconsideration of your accepting my entry. I, for myself and anyone of Alaska, the City and Borough of Juneau, and the Road Runners C my participation in this event, even though that liability may arise out of ne mmunicable diseases and voluntarily assume the risk that I may be expos It in personal injury illness, permanent disability, and/or death. I grant per late purposes. I understand that this event does not provide for refunds in t	ot enter and participate unless I am medically able and properly ide by any decision of a race official relative to any aspect of my read the rules of the race and agree to abide by them. I assume ontraction of a communicable disease from other participants, gh heat and/or humidity, freezing cold temperatures; traffic and nimals, and personal music players are not allowed in the race, bidly for injury up to death of the child being transported in the entitled to act on my behalf, waive and release the Juneau Trail lub of America, all event sponsors, their representatives and giligence or carelessness on the part of the persons named in ed to or infected by communicable diseases by participating in rmission to all of the foregoing to use my photographs, motion
BIB NUMBER:			
SIGNATURE (for race officials only)	SIGNATURE	(for race officials only)	
SIGNATURE of parent or guardian if under 18 DATE	SIGNATURE of parent or guar	rdian if under 18 DATE	