

# 3TV PHOENIX 10K/HALF MARATHON REGISTRATION - 2020

November 8, 2020

www.Phoenix10K.com

Make Checks payable to: 3TV Phoenix 10K/Half Marathon/5K

Postmark entries by 10/28/20 to: Phoenix 10K, P.O. Box 27043, Scottsdale, AZ 85255

<b>EVENTS</b>						Bib Number	Official Use
<input type="checkbox"/> 10K Run	<input type="checkbox"/> 5K Run/Walk	<input type="checkbox"/> 1/2 Marathon <small>&amp; Couples 1/2 Marathon</small>	<input type="checkbox"/> Mollen Mile <small>Open to all ages</small>				
FIRST NAME				LAST NAME			
MAILING ADDRESS						APT./SUITE #	
CITY				STATE		ZIP CODE	
E-MAIL ADDRESS							
PHONE		AGE <small>on 11/3/19</small>		SEX <input type="checkbox"/> F <input type="checkbox"/> M		YOUTH <input type="checkbox"/> M	
						UNISEX SHIRT SIZE <input type="checkbox"/> XS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XX	
						Add \$3 for XXL	

<input type="checkbox"/> <b>Couples 1/2 Marathon</b>	<b>Complete this section for the teammate in the <i>Couples 1/2 Marathon</i> only</b>						Bib Number	Official Use
	<i>Challenge other couples for the best combined time</i>							
Couples Team Name:								
FIRST NAME				LAST NAME				
E-MAIL ADDRESS								
CITY				STATE		ZIP CODE		
PHONE		AGE <small>on 11/3/19</small>		SEX <input type="checkbox"/> F <input type="checkbox"/> M		YOUTH <input type="checkbox"/> M		
						UNISEX SHIRT SIZE <input type="checkbox"/> XS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XX		
						Add \$3 for XXL		

<b>FEE SCHEDULE</b>		
10K Run or 5K Run/Walk	<input type="checkbox"/> \$40 thru - 9/30	<input type="checkbox"/> \$45 10/1 - 11/7
1/2 Marathon	<input type="checkbox"/> \$70 thru - 9/30	<input type="checkbox"/> \$80 10/1 - 11/7
Couples 1/2 Mar. (Per Couple)	<input type="checkbox"/> \$130 thru - 9/30	<input type="checkbox"/> \$155 10/1 - 11/7
Mollen Mile (Ages 3-12)	<input type="checkbox"/> \$10 thru 11/7	<input type="checkbox"/> \$15 Race Day
<b>Mail Back Packets:</b> <input type="checkbox"/> \$10 each <span style="float: right;"><b>Promotional codes are not valid when using this form</b></span>		

**All packets will be available at Runner's Den Nov. 6 - Nov. 7 or race day unless Packet Mailing is selected**

In consideration of your acceptance of this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims for damages I may have against KTVK Television; Pepsico; Blue Cross Blue Shield of Arizona; Mollen Clinic; City of Phoenix; USAT&F; Raceplace Event Systems Inc.; all other sponsors; and any and all officers, partners, members, managers, affiliates, agents, contractors or employees of the foregoing for any and all injuries sustained and suffered by me during this race. I verify that I am physically fit and have sufficiently trained for competition in this event and a licensed medical doctor has verified my physical condition. If, however, as a result of my participation of this race, I require medical attention, I hereby give my consent to such authorized personnel. I also understand that in the event this race cannot be held as scheduled due to an act of God or circumstances beyond control, the race is not liable to refund any money paid by me to participate. Further, I hereby grant full permission to any and all of the foregoing to use any photographs, videotapes, motion picture, recordings or any other record of this event for any legitimate purpose. I have read the foregoing and certify my agreement by my signature below.

		Entry Fee \$		
		Packet Mailing (\$10 each, Optional) \$		
		Deductible Donation to Mollen Foundation (Optional) \$		
		XXL Shirt Fee \$3 \$		
		Total Enclosed \$		

Entrant Signature (or parent if under 18) \_\_\_\_\_ Date \_\_\_\_\_  
 Couples Teammate Signature \_\_\_\_\_ Date \_\_\_\_\_

**Promotional codes are not valid when using this form**