



2009 Towpath Marathon Application – SUNDAY, OCTOBER 11

Release: In consideration of your acceptance of this entry, I/we hereby, for myself, my heirs, executors, and administrators, waive, release and discharge Ohio Canal Corridor, Cuyahoga Valley National Park and any additional hosts or sponsors of the Towpath Marathon and any agent, representative, or employee of the preceding, from any and all claims, demands or causes of action. I/we agree to indemnify and hold each of them harmless for any and all injuries suffered or alleged to be suffered in connection with such event. I/we acknowledge the awareness of the complete assumption of responsibility for the risks involved in this event, and I/we understand the terms of this release. I/we am/are physically fit and have trained sufficiently to compete in this event. I hereby grant full permission to any or all of the foregoing to use any photographs, videotapes, motion pictures, recordings and/or other record of this event for any legitimate purpose. All race entries are non-refundable. The race director reserves the right to refuse entries.

First Name _____ Last Name _____

Street _____ City _____ State _____ Zip _____

Day Phone _____ Evening Phone _____ Email _____ Club _____

Signature _____ Date _____ Sex _____ Shirt Size: S M L XL XXL
Parent/Guardian must sign if participant is under 18 years of age on race day

Date of Birth _____ Age on Race Day _____

RACE LENGTH AND ENTRY FEE: (please circle amount of payment)

Full Marathon	\$55 before 9-1	after 9-1 \$65	expo registration \$70
Half Marathon	\$40 before 9-1	after 9-1 \$45	expo registration \$50
10K	\$30 before 9-1	after 9-1 \$40	expo registration \$45

PAYMENT: (please check one) _____ Check _____ *MasterCard _____ *Visa _____ *AmEx _____ *Discover _____ Cash

_____ Please mail me my D-Tag timing chip and bib ahead of time to the address listed above for an additional \$10.

Credit Card Number _____ Expiration Date _____

*Please note that credit card orders will be charged an additional \$2 per transaction

Print Name on Account _____ Signature _____

Please make checks payable to Ohio Canal Corridor and mail to:

Ohio Canal Corridor Phone: 216-520-1825
PO Box 609420 Fax: 216-520-1833
Cleveland, Ohio 44109

Ohio Canal Corridor's mission is create a park system that follows the route of the historic Ohio Canal from Cleveland through Zoar to Dover/New Philadelphia by promoting historic preservation and interpretation expanded recreational opportunities and sensitive economic developments.