



Navy Birthday 5 Miler Entry Form

Status: Civilian _____ Military _____ Military Grade _____ Check One: Individual ___ Team ___

First Name: _____ Last Name: _____ M.I. _____ Estimated Finish Time: _____
Hours Minutes

Street Address: _____

City: _____ State: _____ Zip Code: _____

Day Phone: _____ Email Address: _____

Age on Day of Race: _____ Gender: M ___ F ___ Adult T-Shirt: M ___ L ___ XL ___

Team Section - Must be Filled Out By ALL TEAM Members (This section only needs to be filled out by runners part of a Team Entry.)

Team Name - Must Be on Each Team Member's Entry

Are you Team Captain? Yes ___ No ___

Team Divisions, Check One Military _____ Civilian _____

Open Men _____ Open Women _____ Open Mixed _____

Masters Men _____ Masters Women _____ Masters Mixed _____

Enlisted: _____ CPO: _____ Naval Officer: _____ Other: _____

IMPORTANT TEAM REMINDERS

Each Team Member must register for the race.

4-person minimum and 6-person maximum per team

Liability & Publicity Release (Each runner MUST SIGN before submitting entry form)

I, intending to be legally bound, do hereby, for myself, my heirs, executors, and assigns, waive, release and forever discharge any and all rights and claims for damages that I may have or which may hereinafter accrue to me against the Navy, the Military District of Washington, the Navy 5 Miler, the Navy Sports Program, its agents, officers, employees, sponsors, their representatives or successors arising out of my association with or participation in the Navy Five-Miler Event. I know that participating in a road race is a potentially hazardous activity and that I should not enter and participate unless I am medically able and properly trained. I understand that I do not need a physical examination to qualify to run the Navy Five-Miler and that I participate at my own risk. I assume all risks associated with running in this race including, but not limited to, falls, contact with other participants, the effects of the weather, traffic, the conditions of the road, unseen weather conditions, and the danger of injury, even death, all such risks being known and appreciated by me. I hereby consent to emergency treatment in the event of my injury and/or illness. I understand that if I do not participate in this race for any reason, or if this race cannot be held due to weather or other unforeseen conditions beyond the Navy Five-Miler control, any expenses incurred or entry fees paid by me to participate will not be refunded. I hereby grant the Navy Five-Miler and its sponsors full use of all information submitted on my application. Information provided will be compiled and utilized for purposes of administering, scoring, and promoting the First Navy Five-Miler. I release all rights to all photographic material, motion pictures, recordings, and any other media or record of this event to be used for legitimate purposes without any obligation to compensation to me. All persons under the age of 18 years of age, unless emancipated, must have the written consent of a parent or legal guardian to compete in the Navy Five-Miler. By signing below, I hereby consent to the applicant's participation and waive and release all rights and claims for damages as is more fully set forth above. I understand that the Navy Five-Miler reserves the right to reject any entry.

Signature (parent or guardian, if under 18) ALL RUNNERS MUST SIGN HERE

Date

____ If requested, the runner information may occasionally be provided to sponsors for legitimate business purposes. If you do not want your information released to sponsors, without your direct consent, please check here.

Entry Fee (No refunds) ___ Registration Fee by September 24 ___ Registration Fee after September 24

Entry Fee is non-refundable. Race number is non-transferable. Runner substitutions will not be accepted. Same day registration will not be accepted.

Payment Methods: Mail completed entry form with payment to: _____
Check NDW Anacostia Annex _____
Money order Attn: Navy 5 Miler _____
Credit Card 2770 Enterprise Way, SW, Suite 106 _____
Washington, DC 20373-5823 _____
___ Check/money order enclosed ___ VISA ___ Mastercard
Card # _____ Expi. Date: _____
Signature _____ Date _____
(Credit card signatures only-Must sign waiver above to complete entry.)

Make Checks Payable to: Navy Sports Program

Or fax completed entry forms with credit card payment information to (202) 433-2422. Total Payment Enclosed: _____

Contact the Navy 5-Miler Info Line at (202) 433-2066 for entry fee information.