

THRIFTY FOODS 
Kids Run
 Registration Form



One Entry Per Person

First Name _____
 Last Name _____
 Address _____
 City _____ Province / State _____
 Postal Code / Zip _____ Country _____
 Sex: M F Date of Birth YR / MO / DA
 Age on October 13, 2019 _____
 Circle Shirt Size (Youth Sizes) YS YM YL
 Circle Shirt Size (Adult Unisex Sizes) S M L XL
 Phone (evening) _____ (day) _____
 Email Address _____

Any Current Medical Problems / Medications:

WAIVER OF LIABILITY

In consideration of your accepting this entry, I the undersigned, intending to be legally bound hereby, for myself, my family, my heirs, executors and administrators forever waive, release and discharge, any and all rights and claims for damages and causes of suit or action that I may at any time have against the Victoria Marathon Society, GoodLife Fitness Victoria Marathon, City of Victoria, Municipality of Oak Bay, all Victoria Marathon race committee persons, officials and all volunteers and all sponsors of the Thrifty Foods Kids Run and of the marathon and KidSport Greater Victoria for any injury suffered by me as a result of participating in this event. I attest that I am physically fit, am aware of the dangers and precautions that must be taken when running in warm or cold conditions, and have sufficiently trained for the completion of this event. I consent to photographs being taken of myself and my child participating in the Thrifty Foods Kids Run and I agree that such photos may be displayed by KidSport Greater Victoria, GoodLife Fitness Victoria Marathon and Thrifty Foods on their websites and in medium to promote the race.

Signature of Parent/Guardian

X _____ Date _____

REGISTRATION

Number of entries is limited to 1,150. Sorry, no refunds, transfers or deferrals. Parent / Guardian welcome to accompany children on the run - only children need to be registered to take part.

ENTRY FEE (until noon Oct. 11, 2019):	\$20.00
ENTRY FEE - Expo Rate (Oct. 11 & 12, 2019):	\$25.00
Donate \$\$\$ to KidSport:	\$ _____
Total payment:	\$ _____

*Only donations over \$20.00 receive a charitable tax receipt

METHOD OF PAYMENT

- Cash (Do not enclose cash if registering by mail)
 Cheque

Office Use Only	Payment Processed: <input type="checkbox"/> Yes Initials: _____
	Payment Method: <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card

REGISTER ONLINE (until Oct. 11 at noon)

www.runvictoriamarathon.com/racing-events/registration

MAILING ENTRIES

GoodLife Fitness Victoria Marathon
 Box 675, 185-911 Yates St., Victoria, BC, V8V 4Y9, CANADA
 Phone: 250-658-4520 Email: register@runvictoriamarathon.com

IN PERSON

Drop entries at Frontrunners Footwear until Oct. 9 at 12:00 Noon
 1200 Vancouver Street, Victoria, BC

Or at the Victoria Marathon Race Expo
 Fri, Oct. 11, 12:00 - 6:00 pm or Sat, Oct. 12, 9:00 am - 6:00 pm
 Victoria Conference Centre, 720 Douglas Street, Victoria, BC

Office Use Only	
Race #:	Initials: _____

Print name _____