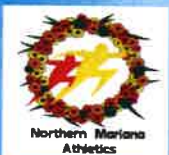


Saipan Marathon 2017



Saturday, MARCH 25, 2017 Mark Your Calendar!

Course: Out & Back, American Memorial Park Microl Beach, CNMI

Runs: 50K (31.06 miles), Marathon (26.2 miles), Half Marathon (13.1 miles) & 10K (6.2 miles)

START TIME: 50K/Marathon (4:00 a.m.)

Half Marathon (5:00 a.m.)

10K (5:45 a.m.)

Must be at start line at least one hour prior to race start.

Race Packet Pick-up: Friday, March 24, 2017 4:00 p.m. to 6:00 p.m. at the Paseo De Marianas. MANDATORY RACE PACKET PICK UP. Each participant is responsible for picking up his or her race packet. No one will be allowed to pick up a race packet for a friend or a family member. NO EXCEPTIONS.

Entrance Fee Information:

US & Local Fee:	50K/Marathon- \$55.00
	Half Marathon/10K- \$45.00
High School/Junior High	\$30.00 School ID required
International Fee:	50K/Marathon-\$90.00
	Half Marathon/10K-\$60.00

Required: Valid ID for CNMI/US. All participants must submit entry forms with payments by the noted deadlines in order to be officially registered to the MVA Office in San Jose. Credit Cards, and Personal Checks are not accepted. *Entry Fee includes: Awards Banquet, Finishers T-shirt, Finishers Medal and Certificate of Completion.*

LATE FEE and DEADLINE INFORMATION: Regular price applies to all entry forms and payments received by Friday, February 24, 2017. Late fee of additional \$10.00 will apply after February 24, 2017. Last day to register will be on Friday, March 10, 2017 at 5:00 p.m. The MVA will not accept any entry forms nor payments after this date.

*** Entry Fee is Non-Transferable and Non-Refundable. Change of race or cancellation after closing date of registration will not be accepted. All Participants must submit entry forms with payment by the noted date in order to be officially registered.**

Up-Coming Events

70.3 SAIPAN IRONMAN- March 11, 2017

XTRERRA SAIPAN - March 18, 2017

For more information, please contact:

Mr. Ed Diaz

Email: ediaz@mymarianas.com

Marianas Visitors Authority

Tel:(670) 664-3200/01

P. O. Box 500861

Fax: (670) 664-3237

Saipan, MP 96950

Website: mymarianas.com



Saipan Marathon 2017



Entry Form

Please read: Each individual must fill-out all the information on this form. If you do not fill in the blanks on this form the MVA **will not** accept your entry form and you will not be able to participate. This is very important information in order for us to get your result. Thank you!

Please fill in the blanks in CAPITAL LETTER carefully:

First Name:													
-------------	--	--	--	--	--	--	--	--	--	--	--	--	--

Last Name:													
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Are you a resident of the CNMI? Yes/No

Mailing Address: _____

Telephone #: _____

EMAIL ADDRESS: _____

Date of birth: _____ AGE AS OF March 2017 : _____
MONTH DAY YEAR

Circle one:

Gender:	MALE	FEMALE
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Please circle one:

Nationality: (USA) (JPN) (KOR) (GUM) (NMI) (PI) (Other) _____

Event you are interested in check one(✓)

50K Kanpei course _____ Full Marathon _____ Half Marathon _____ 10K Fun Run _____

Circle one:

Age Division: 14 & Under 15-19 20-29 30-39
40-49 50-59 60-Up

Circle one:

T-shirt Size (US standard Sizes): S M L XL XXL

Name of Person to contact in case of an emergency: _____

Person's relationship to you: _____

Emergency Contact number: _____

Waiver of Release Agreement

I agree to comply with the rules and regulations of the 2017 Festival of Runs, 50K (Kanpei Course), Saipan Marathon, Half Marathon and 10K Fun Run. I am in consideration of accepting this entry, I hereby for myself, agree not to sue, and will waive and release any and all claims of injury and damages I may have against the event organizers, its officers, directors, volunteers for any and all injuries and damages suffered by me arising out of my participation in this event. I attest that I am physically able and have trained extensively for this competition. I hereby consent to medical treatment, which may be advisable in the event of illness, or injuries suffered by me during this event and authorize to release information relating to my condition. I permit to use of my name, picture, and interviews for use in any broadcast, telecast, advertisement, books, films, videotapes, and any other account of this event with no monetary payment by me.

Signature of Participants or Legal Guardian if under 18 yrs of Age

Date

For accounting purpose ONLY: Receipt # _____

Received payment: _____ Date: _____