



Southern Tennessee

Power Classic

Marathon and Half Marathon



Marathon and Half Marathon

October 1, 2016 7:00 A.M.

1 South Jefferson Street, Winchester TN.

www.southerntennesseemarathon.com

Registration also available online at <http://www.reg2run.com>

Kids Marathon and Half Marathon

October 1, 2016 9:30 A.M.

119 13th Ave. NW, Winchester, TN 37398

EVENT: Full or Half

Last Name

First Name

E-Mail Address

Date of Birth

Age Race Day

Street Address

City

State

Zip Code

Daytime Phone Number

Evening Phone Number

Gender : Male Female

2016 Registration Prices and Deadlines

	Half	Full	Kids	Full and Half (for kids also)	Shirt Hooded Sweatshirts:
April 1 - April 30	\$45	\$65	\$20		Unisex XS S M L XL XXL
May 1 - Jun 15	\$50	\$70	\$20		<input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/> <input type="radio"/>
Jun 16 - Aug 15	\$55	\$75	\$22		
Aug 15 - Oct 1	\$60	\$80	\$25		



Pasta Supper Sept. 30, 2016 5-7:30 p.m. Benefits Franklin County Rotary Club

- Spaghetti & Meatballs

\$7.50 each before Sept. 30, 2016 Number of Tickets: _____

- Bread/Salad/Dessert/Drink

* If mailing in please add to your race fee

Total: _____

THIS IS A LEGAL DOCUMENT. PLEASE READ CAREFULLY BEFORE SIGNING

I know that running is a potentially hazardous activity. I should not enter and run unless I am physically fit, medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I hereby certify I am in good health, and I have trained to run the distance of the race of which I am entering. I assume all risks associated with running in this event, all risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration your accepting my entry into this running event, I, for myself and anyone entitled to act on my behalf waive and release the Southern Tennessee Power Classic Marathon and Half Marathon Foundation, Southern Tennessee Medical Center/ Emerald-Hodgson Hospital, Coffee County Imagination Library, its officers, directors, agents, volunteers, all states, cities, countries or other governmental bodies or location in which events or segments of events are held, all sponsors, their representatives and successors, from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons or entities named in this waiver. I grant permission to all the foregoing to use my photographs, motion pictures, recordings, videos, or any other recording of this event for legitimate purpose. I understand that bicycles, skateboards, baby joggers, roller skates or inline skates, and animals are not allowed in this event and I will abide by this guideline. I am aware that the Foundation strongly discourages the use of personal audio devices (iPods and MP3 headsets).

Signature of Applicant

Emergency Contact

Parent/Guardian Signature for all participants under 18 years of age

Date

Phone

Date

REMIT TO:

Southern TN Power Classic
C/O Frances Samples
207 Jamestown Drive
Tullahoma, TN. 37388