## TOWPATH TRILOGY REGISTRATION FORM

First Name			Last Name			
Street		(	City			Zip Day
Phone	E	Evening Phone	En	nail		
Initialize Here			Date		Sex	Age
Shirt Size: check	<:(Men's) □S			t-shirt		
	(Women's)	S M L		o t-shirt		
Please note the	ere is a \$2.00 ad	ditional charge fo	r XXL			
Date of Birth		Age on Race	Day			
WALKER						
	- ·	articipant is under	•		te	
	TOWP	ATH HALF MARATH (please check i			-	024:
Half Marathon [	\$70		,		<b>,</b>	
5 -Miler	\$40					
Mail my Bib:	Yes (add \$1	0) <b>No "day of" ra</b> d	e nacket nick-	un		
Mail HTy blo					lune 14	2024.
	_	TH Twilight 10-10 ( please check r)				2024.
10-miler:	\$55					
10K	\$45					
5K	\$35					
Mail my Bib:	Yes (add	\$10) No "day of"	race packet pic	ck-up.		
	TOWPATH	MARATHON (Full please check r	· · · · · · · · · · · · · · · · · · ·	•		, 2024:
Full Marathon	\$80					
Half Marathon	\$70					
10K	\$50					
Mail my Bib:	Yes (ac	dd \$10) <b>No "day o</b>	f" race packet j	pick-up.		

Release: In consideration of your acceptance of this entry, I/we hereby, for myself, my heirs, executors, and administrators, waive, release and discharge Canalway Partners, Cleveland Metroparks, and any additional hosts or sponsors of the Towpath Trilogy Race series 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. As a result of signing this mail in

registration you are obligated to be aware of all race rules and regulations listed under the FAQ section of our website www.towpathtrilogy.com

Signature\_\_\_\_\_

Please make checks payable to Canalway Partners and mail to:

Canalway Partners PO Box 609420, Cleveland, Ohio 44109 Phone: 216-520-1825 Email julie@canalwaypartners.com