

US FORCES-EUROPE TEN MILER, USAG GRAFENWOEHR, 10 JULY 2010

REGISTRATION FORM

PLEASE PRINT ALL INFORMATION



_____/_____/_____
Name (Last) (First) (MI) Rank/Grade

Garrison CMR Box APO

Duty Phone Email address

AGE CATEGORIES (ONLY DOD ID CARDHOLDERS)

MEN _____ WOMEN _____ DOB: MM _____ DD _____ YY _____

ARMY _____ AIR FORCE _____ MARINES _____ NAVY _____

ACTIVE RESERVE _____ CIVILIAN _____

U. S. Military & Civilian (18-24 years of age) _____

U. S. Military & Civilian (25- 29years of age) _____

U. S. Military & Civilian (30-34 years of age) _____

U. S. Military & Civilian (35-39 years of age) _____

U. S. Military & Civilian (40-44 years of age) _____

U. S. Military & Civilian (45-49 years of age) _____

U.S. Military & Civilian (50-54 years of age) _____

U.S. Military & Civilian (55-59 years of age) _____

U.S. Military & Civilian (60-64 years of age) _____

U.S. Military & Civilian (65-69 years of age) _____

U.S. Military & Civilian (70 and over) _____

I the undersigned hereby waive and release any and all rights for claims, and damages against, IMA-Europe, the US Army Garrison Grafenwoehr, MWR and any other agency associated with the conduct of this event which includes preparation and execution. This waiver includes releasing the above-mentioned agencies, organizations and activities for any injury I might suffer while participating in this event. I hereby authorize emergency medical treatment if needed. I affirm that the given name and age is correct and I will not transfer my start number to another runner.

SIGNATURE: _____

DATE: _____