

Print Clearly

OFFICIAL REGISTRATION FORM

Use black ink only.

For More Information Enter: www.mongoliamarathon.info

FIRST NAME (Given Name) _____ MI: _____ LAST NAME (Family Name) _____

ADDRESS (Use one block for each number and letter, skip a block between words): _____ APT NO. _____

CITY: _____ STATE: _____ ZIP CODE: _____ COUNTRY: _____

CELL PHONE: _____ **Your passport info.** Number: _____

EMAIL ADDRESS _____ Date of expiry: _____

DATE OF BIRTH: _____ AGE: _____ GENDER: _____
 YEAR MONTH DAY MALE FEMALE

Finisher's Shirt S M L XL XXL *For 42.195 runners only*

IS THIS YOUR FIRST MARATHON? YES NO Please circle the race you are applying for.

Races	Fees	Entry fee by 10.01.16	Entry fee by 15.04.16	Entry fee by 15.05.16	Entry fee 16 May,2016 - 3 Jun, 2016
42.195		60.0	70.0	80.0	100.0
21.1 km		45.0	55.0	65.0	85.0
5km race		15.0			

No vehicles including baby carriages, in-line skates, roller skates, skate boards, pets, bicycles etc. will be allowed on the course on race day.

AGREEMENT.

I AGREE to comply with the rules, registrations, and instructions of the "ULAANBAATAR MARATHON", MONGOLIA.

I UNDERSTAND that participating in a road race is a potentially hazardous activity and can result in serious injury or death. I am aware of and I expressly assume all inherent risks associated with participating in this event, including, but not limited to, falls, contact with other participants, and objects, the effects of weather including high altitude, traffic, and the conditions of the road.

IN CONSIDERATION of your accepting this entry, I for myself and anyone entitled to act on my behalf, waive and release from any and all claims for injuries and damages I may have against the City and Country, their agents and representatives caused by the negligence of any of them arising out of my participation in this event, including pre and post race activities.

I ATTEST that I am physically fit and have sufficiently trained for completion of the MARATHON.

I AGREE to receive medical treatment which may be advisable in the event of illness or injuries suffered by me during this event, and I agree to pay for the costs of my medical treatment.

I AGREE to receive mailings from MARATHON vendors which does not obligate me to purchase any marathon related product.

I PERMIT free use of my name, voice or picture in any broadcast, telecast, advertising promotion or other account of this event.

I AGREE that electronic and printed submission of this application constitutes agreement to all the terms of this agreement.

SIGNATURE

DATE

Signature of parent if entrant is under 18 years of age



FOR OFFICIAL USE ONLY

FAX TO:

976-11-325153

DON'T MAIL THIS FORM.

ALL information is required. Incomplete/illegible forms will result in return of your entry

Please specify here all fees you've chosen to pay for.

ENTRY FEE: _____ US

TRANSFERS: _____ US

HOTEL: _____ US

OTHER: _____

TOTAL: _____ USD

For the invoice information.

Bank transfer in U.S. Dollars payable to:

The Mongolia Marathon
 Entry fee is **NON-TRANSFERABLE**
 and **NON-REFUNDABLE.**
 U.S.Dollars only.

Fax to: **976-11-325153**