

# Registration Form Nittany Valley Half Marathon DECEMBER 3, 2023



Chip Number

Assigned by race office  
not complete

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_  
\_\_\_\_\_

Email: \_\_\_\_\_

In consideration of the acceptance of my entry, and intending to be legally bound, I hereby, for myself, my heirs, my executors and administrators, do waive, release, and discharge all rights and claims which I may have, or which may hereafter accrue to me, against any and or all members of the Nittany Valley Running Club, all named and unnamed sponsors and volunteers, while traveling to and from the event, participating in the event and using any and all facilities, for any and all injuries suffered by me in this event. I understand that a 13.1 mile race is potentially dangerous and hereby attest and affirm that I am sufficiently conditioned for this event.

Signature of Entrant: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature (if participant is under 18)

\_\_\_\_\_

Age Race Day: \_\_\_\_\_

Gender: M F

### Entry Fee:

Race Day \$75

Total Amount Due  
(cash or check made Out to CVIM) \$ \_\_\_\_\_

Credit Card Number  
\_\_\_\_\_

Exp. Date: \_\_\_\_\_ Code: \_\_\_\_\_

Name on Credit Card:  
\_\_\_\_\_

Nittany Valley Half - Marathon

ROLLING START 10 -10:15 AM

CENTRE VOLUNTEERS IN MEDICINE EVENT

[www.nittanyvalleyhalfmarathon.com](http://www.nittanyvalleyhalfmarathon.com)

[www.cvim.net](http://www.cvim.net)

**YOU MUST SIGN THE WAIVERS AND TURN IT IN WITH THE REGISTRATION FORM**