

2019 Illinois Marathon Weekend Registration Form (one per runner)

(Race fees are non-refundable, and bib numbers are non-transferable)

Please print neatly

C-U There!
April 25-27,
2019

11TH ANNUAL
CHRISTIE
CLINIC
ILLINOIS
marathon

First name _____ Last name _____

Address _____ Name on race bib (13 characters or less) _____

City _____ State/Province _____ Postal Code _____ Country _____

Sex: M / F Birthday ____/____/____ Age on race day _____ Wheelchair entry (half only)

Phone _____ Provider (if phone is cellular) _____ E-mail _____

Emergency contact _____ Emergency phone number _____

Full/Half Marathon shirt size (gender-specific tech shirt) *adult* XS (women only) S M L XL XXL

5K, 10K, Relay shirt size (unisex tech shirt) *adult* XS S M L XL XXL XXXL *youth* S M L

Race: Full I-Challenge* Half I-Challenge* Mini i-Challenge* Marathon Half Marathon

10K Run/Walk 5K Run/Walk Marathon Relay I-Challenge*

Marathon Relay (Each relay participant must complete his or her own registration form, including the waiver signature. Relay registrations must be submitted together.)

Team name _____ Captain name _____

Division: Male Female Mixed (2 male, 2 female) 3 & 1 (any combination)

Estimated finish time (hh:mm): : **REQUIRED for full, half, relay, and 5K entrants only**

Marathoners: check box if this is your first marathon **Half marathoners: check box if this is your first half**

***I-Challenge Events:** Full I-Challenge is the 5K (Friday) + the marathon (Saturday); Half I-Challenge is the 5K (Friday) + the half (Saturday); Mini i-Challenge is the 5K (Friday) + the 10K (Saturday); Marathon Relay I-Challenge is the 5K (Friday) + the marathon relay (Saturday). I-Challenge runners receive a unique I-Challenge medal at the finish line, in addition to their 5K medal + a full, half, 10K medal, or relay medal.

University of Illinois alumnus/a? (Check all boxes that apply.) Urbana-Champaign Campus Chicago Campus Springfield Campus

Pasta Feed @ ARC—University of Illinois, Friday, April 26, 4:00 P.M. to 7:00 P.M.

Eat any time between 4:00 to 7:00 P.M.

Adult ____ \$17 (indicate quantity) Child (10 & under) ____ \$8 (indicate quantity)

Activities Recreation Center (ARC) Pass: \$6.00. Your pass gives you access to all ARC facilities, including showers, on Saturday, April 27. **BRING YOUR OWN TOWEL.**

Things to Remember

- Registration for all races closes on April 21, 2019.
- There is no registration on April 27 except for the Youth Run.
- Packet pickup is available at the expo: Thursday, April 25 from 4:00 P.M. to 8:00 P.M. and Friday, April 26 from 10:00 A.M. to 7:00 P.M. Activities and Recreation Center (ARC) at the University of Illinois.
- Race fees are non-refundable, and bib numbers are non-transferable.
- Registration fee includes a shirt, drawstring backpack, finisher medal, postrace food, and one beverage at the Street fest on Friday or Saturday. To receive the beverage, entrants must bring their race bib to the Street fest.

Waiver: In consideration of the acceptance of this entry, I hereby, for myself and my heirs, executors, and administrators, waive any and all rights, claims, and damages I may have against the C-U Marathon, LLC, the sponsors, coordination groups, the City of Champaign, the City of Urbana, and any individuals associated with said event. Also none of the above is responsible for either the loss of personal items or any aggravation in connection with said event. I also give permission for the free use of my name and picture in any broadcast, telecast, or print media account of this event. In filling out this form, I acknowledge that I have read and fully understand my own liability and do accept the restrictions. Drug testing: Athletes who participate in this competition may be subject to formal drug testing in compliance with the USATF and IAAF Rule 144. Athletes found positive for banned substances, or who refuse to be tested, will be disqualified from this event and will lose eligibility for future competition. If you are under 18 years of age, you must have the signature of your legal guardian to participate in this event.

Signature _____ Date _____

Payment summary

Race fees: \$ _____

Pasta feed: \$ _____

ARC pass: \$ _____

Paper registration \$ 5.00

Processing fee

Total enclosed: \$ _____

5K — Friday, April 26, 2019, 7:30 P.M.

Marathon — Saturday, April 27, 2019, 7:03 A.M.

Marathon Relay — Saturday, April 27, 2019, 7:03 A.M.

Half Marathon — Saturday, April 27, 2019, 7:03 A.M.

10K — Saturday, April 27, 2019, 7:40 A.M. approx.

Make check payable to C-U Marathon, LLC. Mail registration to Illinois Marathon, PO Box 262, Champaign IL 61824.

RACE FEES

Marathon	Postmarked by
\$90	8-15-2018
\$95	10-31-2018
\$100	1-15-2019
\$105	2-28-2019
\$115	3-31-2019
\$120	after 4-1-2019
Full I-Challenge	Postmarked by
\$120	8-15-2018
\$130	10-31-2018
\$140	1-15-2019
\$150	2-28-2019
\$165	3-31-2019
\$175	after 4-1-2019
Half Marathon	Postmarked by
\$65	8-15-2018
\$70	10-31-2018
\$75	1-15-2019
\$80	2-28-2019
\$90	3-31-2019
\$95	after 4-1-2019
Half I-Challenge	Postmarked by
\$95	8-15-2018
\$105	10-31-2018
\$115	1-15-2019
\$125	2-28-2019
\$140	3-31-2019
\$150	after 4-1-2019
Marathon Relay	Postmarked by
\$140/team	8-15-2018
\$160/team	10-31-2018
\$180/team	1-15-2019
\$200/team	2-28-2019
\$220/team	3-31-2019
\$240/team	after 4-1-2019
Marathon Relay I-Challenge	Postmarked by
\$260/team	8-15-2018
\$300/team	10-31-2018
\$340/team	1-15-2019
\$380/team	2-28-2019
\$420/team	3-31-2019
\$460/team	after 4-1-2019
10K	Postmarked by
\$35	8-15-2018
\$40	10-31-2018
\$45	1-15-2019
\$50	2-28-2019
\$55	3-31-2019
\$60	after 4-1-2019
5K	Postmarked by
\$30	8-15-2018
\$35	10-31-2018
\$40	1-15-2019
\$45	2-28-2019
\$48	3-31-2019
\$50	after 4-1-2019
Mini i-Challenge	Postmarked by
\$65	8-15-2018
\$75	10-31-2018
\$85	1-15-2019
\$95	2-28-2019
\$105	3-31-2019
\$115	after 4-1-2019