

MOVE MOVEMENT

Half Marathon Class



You'll receive a Tech T-Shirt, 10 weeks of personalized coaching, a pair of technical running socks, nutrition information, recovery information, learning new training routes, training schedule for non-meeting days, info about cross training, a team to hold you accountable, friendship, motivation, fun, and the best chance of completing your first or fastest running your fastest half marathon!

Class Schedule – meet at Ritter Park

Thursdays 6pm 8/28, 9/11, 9/25, 10/9, 10/23, 10/30

Saturdays 7:30am 9/6, 9/20, 10/4, 10/18

Questions? Contact Kat at kathleensmith266@gmail.com

Name: _____

Address: _____

Phone #: _____

Email Address: _____

Emergency Contact (Name/Phone): _____

Date of Birth: _____

T-shirt size: Men's XS S M L XL XXL Women's XS S M L XL XXL

How did you hear about this training program? _____

Please answer:

- 1) About how many days a week are you running/walking? _____
- 2) How far are you currently running/walking? _____
- 3) Are you currently experiencing any pains or injuries associated with your running/walking?

What goals do you have for this half marathon? (ie. Goal times, to finish, to beat my husband, etc.)

Do you have any health issues that may restrict your activity level? (Asthma, joint pain, etc.)

Waiver: I acknowledge that exercising is a potentially hazardous activity and may entail known and unknown or unanticipated risks, which could result in physical injury, death or property damage. I hereby assume all risks associated with this event, including, but not limited to, falls, contact or confrontation with other participants, passers-by, or spectators, inclement weather, effects of weather (including high heat and/or humidity), traffic and/or road conditions, and other risks. I understand that such risks cannot be eliminated without jeopardizing the essential qualities of the activity. These risks may also occur as a result of my own actions, inactions or negligence, as well as actions, inactions or negligence of others, weather conditions, condition of equipment, condition of the streets, facilities, and/or grounds, natural disaster, national disaster, and any first aid emergency treatment which may be administered. There may also be other risks that are not foreseeable at this time. I hereby agree to abide by any decision of a race official relative to my ability to safely participate, compete in, or complete the event. I acknowledge that As part of the consideration for my participating in the activity identified above, I hereby release, discharge, and hold harmless Robert's Running and Walking Shop as well as any coaches, officer, employee, or any person acting in any capacity on their behalf from all demands, claims, causes of action, suits, contracts, agreements, obligations, covenants, defenses, costs, liabilities and judgments, whatsoever, known or unknown, suspected or unsuspected, whether sounding in contract or in tort, in law or in equity, which I might have against any or all of them, arising from or related to my participation in the event. I hereby waive all claims and demands against the organizers for any loss, damage, injury (including death) or claim of any kind arising from, related to or caused by my participation and agree to indemnify, defend, and hold harmless the organizers from all loss, liability, damages, costs, and expenses (including actual attorney's fees) arising from or related to same.

Signature (Legal Guardian if under 18) _____ Date _____

Cash, Check, or Venmo (@katsmith266) payments accepted. Checks should be made payable to Kathleen Smith. Registration can be mailed by August 25th to Robert's Running and Walking Shop, 3591 US Route 60 Huntington, WV 25705 or dropped off at either shop location through August 27th.