

2010 TEAM SALUTE APPLICATION

Mail to: SALUTE, INC., P.O. Box 236 Prospect Heights, IL 60070

Email to: teamsalute@yahoo.com Fax: 847-359-8818

REQUIREMENTS:

- **Step One:** Complete this application prior to your event and return to address (mail, email, or fax) above.
- **Step Two:** Register for your event.
- **Step Three:** Agree to raise the minimum indicated below due on the day of your event.

INCENTIVES:

- Commit to raise the minimum indicated below and receive a TEAM SALUTE technical shirt or singlet.
- Raise \$750 and receive a TEAM SALUTE runner's hat.
- Raise \$1500 and receive a TEAM SALUTE runner's bag.
- Raise \$5000 and receive a limited edition TEAM SALUTE Running Jacket.



NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

CONFIRMATION OR REGISTRATION #: _____

MALE

S M L XL XXL

TECH SHIRT OR SINGLET (CIRCLE SIZE & SHIRT OPTION)

FEMALE

XS S M L XL

TECH SHIRT OR SINGLET (CIRCLE SIZE & SHIRT OPTION)

EVENT: (PLEASE CIRCLE ONE OR LIST YOUR OWN)

Country Music Marathon & 1/2 Marathon - 4/24/10 (\$400)

Soldier Field 10 Mile - 5/29/10 (\$250)

Rock 'N Roll Half Chicago - 8/1/10 (\$300)

Chicago 1/2 Marathon & 5K - 9/12/10 (\$300)

Marine Corps Marathon - 10/31/10 (\$400)

Wisconsin Marathon & 1/2 Marathon - 5/1/10 (\$300)

Trek Women's Triathlon - 7/11/10 (\$400)

Chicago Triathlon - 8/29/10 (\$400)

Chicago Marathon - 10/10/10 (\$400)

Your Choice: _____ Minimum TBD

I agree that if I do not raise the minimum (indicated above) by the date of my event for TEAM SALUTE, then SALUTE, INC. is authorized to charge my credit card listed below. _____ (initials)

In the event that I am injured or unable to participate in my event, I agree that I will fulfill my commitment to raise the minimum (indicated above) by the date of my event for TEAM SALUTE, or SALUTE, INC. is authorized to charge my credit card listed below. _____ (initials)

CHECK ONE:

M/C Visa Amex

CREDIT CARD # _____

SIGNATURE: _____ EXP DATE ____/____/____ V CODE _____ (3 or 4 digit code)

WAIVER

I recognize and acknowledge that there are certain risks of physical injury to participants in these programs/activities and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity that I may sustain as a result of said participation. I further agree to waive and relinquish all claims I may be entitled to (or accrue to me) as a result of participating in these programs/activities against: Salute, Inc., including its officials, agents, volunteers and employees. I do hereby fully release and forever discharge Salute, Inc. from any and all claims for injuries, damage or loss that I may have or which may accrue to me and rising out of, connected with, or in anyway associated with these activities. Participants registering hereby permit the taking of photographs, audio, or video taping during the Salute, Inc. activities for publication and use as Salute, Inc. deems appropriate. **I HAVE READ AND FULLY UNDERSTAND THE ABOVE AND WAIVE AND RELEASE ALL CLAIMS:**

Signature: _____

Date: _____