

2011 TEAM SALUTE APPLICATION WISCONSIN MARATHON

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 and return to address (mail, email or fax) above.
- **Step Two:** Register for your event at www.wisconsinmarathon.com
- **Step Three:** Agree to raise the minimum indicated below.

INCENTIVES:

- Commit to raise the minimum of \$300 (Half Marathon) or \$400 (Marathon) and receive a TEAM SALUTE technical shirt or singlet.
- Raise \$500 and receive a TEAM SALUTE runner's hat.
- Raise \$750 and receive a TEAM SALUTE runner's bag.
- Raise \$3,000 and receive a limited edition TEAM SALUTE Running Jacket.



NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

HAVE YOU SERVED IN THE US MILITARY? ____ IF YES, WHEN & WHERE: _____

\$300 - HALF MARATHON

\$400 - FULL MARATHON

MALE

S M L XL

TECH SHIRT OR SINGLET (CIRCLE SIZE & SHIRT OPTION)

FEMALE

S M L XL

TECH SHIRT OR SINGLET (CIRCLE SIZE & SHIRT OPTION)

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)

Check one:

M/C Visa Amex

Credit Card #

_____-_____-_____-_____-_____-_____-_____-_____-_____-_____-

SIGNATURE: _____ Exp Date ____/____/____ V Code _____ (3 or 4 digit code on back)

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: _____

Office Use Only

Date Received _____

Welcome Packet Sent _____

Date Recorded _____