

# REGISTRATION FORM



PRESENTS

# THE Bull Runner *Dream* MARATHON IN NUVALI



DATE: Saturday, 22 May 2010

VENUE: Nuvali, Sta. Rosa, Laguna

DISTANCE: 42 km

REGISTRATION FEE: P950

Registration Date: \_\_\_\_\_, 2010

**PLEASE PRINT CLEARLY!**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Address \_\_\_\_\_

Birthdate \_\_\_\_\_ Age on race day \_\_\_\_\_ Gender  M  F

Phone number \_\_\_\_\_ Mobile number \_\_\_\_\_

Email Address \_\_\_\_\_ Blog / website(if any) \_\_\_\_\_

Team/ School/ Company \_\_\_\_\_ Shirt size  S  M  L  XL

How long have you been running? Years \_\_\_\_\_ Months \_\_\_\_\_

Have you finished a marathon (42km) before? \_\_\_\_\_

Have you finished a 21k before? \_\_\_\_\_ If so, how many? \_\_\_\_\_ Best time? \_\_\_\_\_

Have you finished a 10k before? \_\_\_\_\_ If so, how many? \_\_\_\_\_ Best time? \_\_\_\_\_

Have you finished a 5k before? \_\_\_\_\_ If so, how many? \_\_\_\_\_ Best time? \_\_\_\_\_

Do you have any pre-existing medical conditions? If yes, please elaborate: \_\_\_\_\_

IN CASE OF EMERGENCY, contact:

Name \_\_\_\_\_ Relation \_\_\_\_\_ Phone No. \_\_\_\_\_

Why do you want to join TBR Dream Marathon? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**FOR ORGANIZER'S USE ONLY**

NAME OF CASHIER: \_\_\_\_\_

SIGNATURE OF CASHIER: \_\_\_\_\_

IN COOPERATION WITH:



VENUE SPONSOR:



# RULES & REGULATIONS

1. Upon payment, the participant is a CONFIRMED participant of the event. The submitted registration form will be screened by the organizing committee. The organizer reserves the right to disqualify participation anytime prior to race day if the participant fails to pass these qualifications:
  - TBR Dream Marathon will be the first marathon of the participant;
  - Participant is physically fit to participate in the event;
  - Participant completed and submitted REGISTRATION FORM;
  - Participants signed the WAIVER in person and submitted it along with the registration form;
  - Participant committed to submit the MEDICAL CERTIFICATE on or before March 31, 2010.
2. Participant must be of legal age at the time of registration.
3. Family and friends are welcome to attend, but are advised to bring their own food/hydration requirements as the organizer shall only provide food for registered participants. Food and drinks will be available for purchase at Nuvali by 6:30 am

## MEDICAL CERTIFICATE

The organizer requires participants to submit a medical certificate from a licensed physician that will certify that he/she is fit to participate in the marathon. Participants who fail to submit the medical certificate shall not be allowed to join the marathon. Deadline for submission: on or before WEDNESDAY, MARCH 31, 2010 at Nike Park, Bonifacio High Street.

## RACE BIB / NUMBER

Participants must pin the race bib visibly on the shirt.

## WATER & FIRST AID STATIONS

Mineral water and sports drink stations will be provided at the finish line and at every 2.5km after the first 5 km.

## MEDICAL AID

Medical aid will be available at the 21km mark and at the start line / finish line. We will also have a roving ambulance.

## TOILET AREA

Toilets are available at Evolving and Solenad

areas. Portalets will also be available at the site during the race and designated areas of the race course.

## PARKING AREA

All participants and other spectators are required to park their vehicles at the allocated parking area.

## BAGGAGE AND OTHER VALUABLES

Runners are advised to leave valuables at home. The race organizer will not be responsible for any lost items in the parking area or in the race area.

## ELECTRONIC TIMING CHIP

Official time will be based on the disposable Champion Chip provided in the race packet. The chip must be secured by the participant to the shoes prior to the race, failure to do so will mean no official place or time will be published for you.

## FINISHING TIME

The maximum race time is 8 hours.

## FINISHER'S MEDALS & PRIZES

In TBR Dream Marathon, every finisher is a winner. Medals will be awarded to each finisher. There will be no prizes for top finishers.

## PHOTOVENDO & RUNPIX ANALYSIS

After the race, participants may download photos from Photovendo for free at [www.thebullrunner.com](http://www.thebullrunner.com)

## WEATHER

The event takes place rain or shine.

## REFUND & SUBSTITUTION

The registration fee is non-refundable. The organizer will allow for a runner to substitute for another runner but with written notification 2 weeks before race day. The substitute runner must undergo screening process and pass qualifications as well.

## MISCELLANEOUS

The organizer reserves the right to change these Rules and Regulations at any time without need of prior notice to the participants.

The organizer shall not be liable for damages or have the right to terminate this event for any delay or default in performing hereunder if such delay or default is caused by conditions beyond its control including, but not limited to Acts of God, government restrictions, wars, insurrections, and/or any other cause beyond its reasonable control.

## RELEASE, WAIVER AND QUITCLAIM

*NOTE: This document will affect your legal rights, read it carefully. Participants must be at least eighteen (18) years of age. Every participant must read, understand and sign this Release, Waiver and Quitclaim prior to participating in the event.*

I, \_\_\_\_\_ of legal age, (single/married),  
\_\_\_\_\_ citizen, with principal address at \_\_\_\_\_,  
\_\_\_\_\_, do hereby state that:

1. In consideration for being permitted to participate in The Bull Runner Dream Marathon in Nuvali, I hereby agree to assume all loss, damage, illness injury, including death, arising from the event and I release and hold free and harmless the organizers, partners, agents and representatives, and any successors or assigns from any and all claims, actions, causes of action, liabilities of any nature or kind arising out of or in any way connected to my participation in the event.
2. I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property loss.
3. I acknowledge and understand that there are inherent and significant risks associated with participation in the event, including (but not limited to) the potential for serious injury caused by any decreased blood pressure, chest discomfort, muscle cramps, strains, sprains, abnormal heart rate, soreness, nausea, heart attack, stroke and possibly death. I understand that such risks are relative to my level of fitness and health. Other risks include, but are not limited to those caused by terrain, facilities, actions of other people including, but not limited to participants, volunteers, spectators, coaches, event officials, and event monitors, temperature, weather, condition of athletes, equipment, vehicular traffic, and lack of hydration.
4. I understand that the coaches, trainers, and other individuals involved in staging the event are not licensed physicians and any suggestions or recommendations they may make regarding any aspect of my training or physical fitness are not being given as medical advice.
5. I verify that I am physically fit and capable of participating in the Event, and that my physician has approved my participation. I hereby acknowledge that I am solely responsible for my personal health and safety. I agree to immediately inform a trainer, coach, marshal, official or other representative of the organizers immediately upon feeling any pain, discomfort, fatigue or symptoms during or immediately following the event. I understand that I may stop participation at any time, and that I may be requested to do so by any representative of the organizers who observes symptoms of distress or abnormal response from me during my participation.
6. I hereby consent to the organizers, their representatives and assigns to apply first aid and other emergency medical treatment for any injury or illness that may occur during my participation in the event.
7. I hereby grant my consent and permission to the organizers, its partner organizations and sponsors to use any and all information submitted in my application, and/or my name, photograph, videotape, motion picture recording, voice or likeness, including pre-marathon and post-marathon publicity free of charge.
8. I finally declare that I have read and understood this document of Release Waiver and Quitclaim which is hereby given and made willingly and voluntarily and with full knowledge of my rights under the law.

IN WITNESS WHEREOF, I have hereunto affixed my signature on this \_\_\_\_\_ day of \_\_\_\_\_,  
at \_\_\_\_\_.

\_\_\_\_\_  
(Print Name and Sign)

Signed in the presence of: