



## Saturday 6<sup>th</sup> July 2013

**Race Details:** Race will start at 11.00am at Keel Sandybanks. Achill Island, Co. Mayo. Race pack, t-shirt and goodie bag can be collected from Race HQ from Friday 2pm – 11pm and Saturday from 7.30am – 10.00am.

**PLEASE PRINT IN INK OR BALL POINT PEN IN BLOCK CAPITALS**

**Which event are you entering?**

**Half Marathon**                       **10k**

**TITLE:** Mr / Mrs / Ms / Other \_\_\_\_\_ **GENDER:** Male / Female

**FIRST NAME:** \_\_\_\_\_

**SURNAME:** \_\_\_\_\_

**NATIONALITY:** \_\_\_\_\_

**AGE ON THE DAY OF THE RACE :** \_\_\_\_\_ **DATE OF BIRTH:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY / TOWN:** \_\_\_\_\_

**COUNTY/REGION:** \_\_\_\_\_ **COUNTRY:** \_\_\_\_\_

**POSTCODE:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**ARE YOU NATIVE OF ACHILL?** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_ **MOBILE TELEPHONE NUMBER:** \_\_\_\_\_

**Name of Athletics Affiliated Club (if applicable):** \_\_\_\_\_

**Do you have a medical condition about which the organisers should be informed?** \_\_\_\_\_

If your answer is "Yes" please state nature of your condition

**Where did you hear about us?**

Completed Achill Half Marathon before	<input type="checkbox"/>
Online website	<input type="checkbox"/>
Booking Agent	<input type="checkbox"/>
Poster/Advertising	<input type="checkbox"/>
Local	<input type="checkbox"/>

**Indicate which category you will be entering:**

Male Runner  Female Runner  Walker  Wheelchair

**Runner Class:** Elite (PB under 90)  Runner  Walker

**How many nights are you planning to stay?** 1 night  2 night's  More than 2 night's

**Indicate your T-shirt size: (PLEASE NOTE T-SHIRTS ARE MALE & FEMALE)**

Men's            XXL    XL        Large            Medium            Small

Ladies            XXL    XL        Large            Medium            Small

All runners will be provided with a bib number and chip and this must be worn as directed by the race Director  
I Agree

If you would like further information on other Events or Festivals please tick the box

**If you are collecting the race pack for someone else you will be asked to sign for it.**

Please post your entry form along with a cheque/postal order or bank draft for €59.00 made payable to Achill Event Management. **(Please note that an admin fee of €4.00 has been applied to your entry fee).**

Post your entry forms to:

Achill Half Marathon  
C/O Achill Tourism  
Davitt Quarter  
Achill Sound  
Achill  
Co Mayo  
IRELAND

### **2013 Sponsorship Fundraising**

Achill Event Management is pleased to announce our nominated National Charity for 2013. A donation will be made from the proceeds to the Pieta House. For more information log onto [www.pieata.ie](http://www.pieata.ie). If you would not like to raise essential funds for Pieta House please un tick the box (please note that by un ticking the box you have agreed to send your contact details to Pieta House)  **Yes**

### **Declaration Form:**

I understand that participating in this event is potentially hazardous, and that I should not enter and participate unless I am medically able and properly trained.

In consideration of the acceptance of this entry, I assume full and complete responsibility for any injury or accident which may occur while I am travelling to or from the event, during the event, or while I am on the premises of the event. I also am aware of and assume all risks associated with participating in this event, including and not limited to falls, contact with other participants, effect of weather, traffic, and conditions of the road.

I, for myself and my heirs and executors, hereby waive, release and forever discharge the event organisers, sponsors, promoters, Active.com, and each of their agents, representatives, successors and assigns, and all other persons associated with the event, for all my liabilities, claims, actions, or damages that I may have against them arising out of or in any way connected with my participation in this event.

I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.

**I understand that the entry fee is non-refundable and non-transferable. I hereby grant full permission to any and all of the above parties to use any photographs, videotapes, motion pictures, website images, recordings or any other record of this event.**

**We advise that any potential participant not currently involved in physical sporting activity, should undertake a medical examination before taking part in the race.**

I understand that I enter the Achill Half Marathon at my own risk and that nether Achill Event Management Limited or any of our sponsors will be held responsible for any accident suffered or injury sustained by myself from any cause whatsoever or for any property lost, mislaid or stolen on the course or at the changing areas. I understand that this waiver includes any claims, whether caused by negligence, the action or inaction of any of the above parties, or otherwise.

**Entrants must be over 18 years of age on race day.**

Signature: \_\_\_\_\_

Date: \_\_\_\_\_