

Chicago Area Runners Association
203 North Wabash Avenue, Suite 1104 • Chicago, IL 60601
Phone 312.666.9836 • Fax 312.781.1736
You can also register online at www.CARAruns.org



CARA's 2002 MARATHON TUNE UP SESSION with Coach Bill Leach
September 9 – October 10

YOUR INFORMATION

Name _____ CARA # _____
Address _____ Singlet S M L XL
City, State, ZIP _____
Home Phone (_____) _____ Work Phone (_____) _____
E-Mail _____ Gender _____ Birth Date _____

SESSION (check time preference) Sept 9 – Oct 10 6:00AM 5:30PM

REGISTRATION FEES

CARA Member (or joining CARA now) – enter \$65 \$ _____
Non-Member – enter \$85 \$ _____

CARA MEMBERSHIP – Join CARA and save \$20 on the program

Individual – 1-Year (add \$35) – 2-Year (add \$60) \$ _____
Family – 1-Year (add \$50) – 2-Year (add \$70) \$ _____

TOTAL \$ _____

PAYMENT METHOD (check one)

Cash Check VISA MasterCard Discover

Credit Card # _____ Expiration _____

NOTE -- You must sign the waiver below. The registration fee must be paid before beginning any program. **No refunds** will be issued in full or in part for any reason, including injury, after a program begins. **No prorated fees** are provided for late enrollments.

WAIVER -- In consideration of being permitted to participate in this CARA program, I do hereby, for myself and heirs and personal representatives, release and discharge the Chicago Area Runners Association, Coach Bill Leach, Wendy's, New Balance, CLIF Bar, and their affiliates, agents, employees, officers, directors, successors, assigns, and all other persons connected with this program, from any and all liabilities on account of any injury, death, or damage growing out of my participation, whether caused by their negligence or otherwise. I am physically fit and sufficiently trained to participate in this program and recognize the risks involved, and intend by this release to assume full responsibility for anything that might happen to me.

Signature _____ Date _____