

Sunday, January 31, 2010
Waco, TX

Volunteer Form



First Name: _____ Last Name: _____
Name of organization (if applicable): _____ # volunteers from group _____
Address: _____ City: _____ State: _____ Zip: _____
Daytime Phone: _____ Email: _____
T-shirt size: S M L XL Are you a marrow or blood stem cell donor or recipient? _____

Please check the volunteer activities in which you wish to participate:

1 Mile, 5K Race Day Morning, Saturday, January 30, 2010

- Packet pick-up/Registration 7:00 to 9:00 a.m. Course volunteer (flag turns) 7:00 to 9:30 a.m.

Marathon Expo & Packet Pickup Saturday, January 30, 2010

(Hand out t-shirts and race packets for Sunday races)

- 11 am to 1 pm 1 to 3 pm 3 – 5 pm 5 – 7 pm

Marathon & Half Marathon Race Day, January 31, 2010

- Packet pick-up/Registration 6:00 to 7:45 a.m.
 Course volunteer (flag turns & staff intersections) 7:00 to 9:30 a.m. 9:30 to 11:30 11:30 to 2:00 p.m.
 Finish Line (remove timing chips from runners & post results) 8:30 to 10:30 10:30 to 12:30 12:30 to 2:30
 Rest stop staff - Times and locations will vary; you will be contacted to discuss available locations.

WAIVER STATEMENT: Invalid if not signed. I, the undersigned, assume full and complete responsibility for any injury or accident, which may occur during my participation in the event or while I am on the premises of the event. I hereby release and hold harmless the Miracle Match Marathon, Scott & White, City of Waco, Waco Striders, Baylor University, the sponsors, promoters and all other persons and entities associated with the event or their agents or employees or otherwise. I will not enter and participate unless it is medically safe for me and I am properly trained. I also know that although protection services will be provided, there may be traffic on the course route. I assume all risk associated with this event, including but not limited to falls, contact with other participants, the effects of weather including high heat and/or humidity and rain, and the conditions of the road, all such risks being known and appreciated by me. I further grant my permission to use any photographs, videotape, motion pictures, recordings, or any other record of this event that includes myself. T-shirt is not guaranteed. Fees are non-refundable. I have read the forgoing and certify my agreement by this signature, and my parent's/guardian's if under 18.

Signature: _____ Date: _____

Parent or Legal Guardian Signature, for minor _____

Mail this form to: **Miracle Match Marathon**
2401 South 31st Street
Temple, TX 76508

Or fax to (254) 724-9601

<http://mmm.sw.org>

(888) 724-2811 toll-free (race administrator) or 254-405-2518 (race director)