☐ All Female



## FULL • HALF • RELAY OFFICIAL ENTRY FORM

Race Date: Sunday, 7 December 2025

Please PRINT CLEARLY and complete entire form. Four separate entry forms MUST be completed for the 4-person relay team members and should be submitted together with the entry fee.

Please email info@caymanislandsmarathon.com for information on other ways to register.

What event are you entering? 
Marathon Half Marathon CUC 4-Person Relay

Relay Team Name: ...... Division: Corporate Mixed All Male

REG. FEES	Marathon	Half-Marathon	CUC 4-Person Relay
Until Dec. 31, 2024	US\$80	US\$55	US\$175
Jan.1 to Aug. 31	US\$95	US\$65	US\$195
Sept.1 to Oct. 31	US\$105	US\$70	US\$215
Nov. 1 to Nov. 30	US\$115	US\$75	US\$235
Dec. 1 to Dec. 3 and Dec. 6 (packet pick up)	US\$125	US\$80	US\$255

First Name:					
Gender: Male Fe	· ·	e Age on Race Day:			
Birthdate (DD/MM/YY)	(DD/MM/YY) Email:				
Address:	PO Box (if applicable):				
City:	State:	. Zip/Postal Code:	Country:		
Mobile Phone:					
Emergency Contact Person? Phone:					
Tech Shirt Size: XS S M L ZXL 2XL No shirt please					
How did you hear about the Walkers Cayman Islands Marathon?					
Have you participated before? If so, how many times?					
<b>WAIVER OF LIABILITY:</b> In consideration of your accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my family, my heirs, executors, and administrators, forever waive, release and discharge any and all rights and claims for damages and causes of suit or action, known or unknown, that I may have against the Walkers Cayman Islands Marathon, Kelly Holding Ltd., Beaufort Investments Ltd., Walkers law firm, the Cayman Islands Athletics Association, Ministry of Youth & Sports, Portfolio of Internal & External Affairs, the Department of Tourism and all other political entities, all independent contractors and construction firms working on or near the course, all Cayman Islands Marathon organisers, officials and volunteers and all sponsors of the Marathon and the related Marathon events and their officers, directors, employees, agents and representatives, successors and assigns, for any and all injuries suffered by me in this event.					
I attest that I am physically fit, aware of the dangers and precautions that must be taken when running in warm conditions and have sufficiently trained for the completion of this event. I also agree to abide by any decision of an appointed medical official relative to my ability to safely continue or complete the event. I further assume and will pay my medical and emergency expenses in the event of an accident, illness or other incapacity regardless of whether I have authorised such expense. Further, I hereby grant full permission to the Walkers Cayman Islands Marathon and/or agents authorised by them, to post my race results, to use any photographs, videotapes, motion pictures, recording or any other record of this event for any legitimate purpose at any time. I further understand that there are no entry refunds, exchanges, transfers or rollovers, and that the event may be cancelled due to any of the following reasons, among others, weather conditions, natural disasters, or threats to local and/or national security including suspected terrorist activity.					
I HAVE READ THE ABOVE WAIVER CAREFULLY AND UNDERSTAND IT.					
Signature		Date			