



Register online at:  
DaytonaBeachHalf.com



Presenting Sponsors:



# REGISTRATION FORM

## DAYTONA INTERNATIONAL SPEEDWAY

Events:

- Sunday, Feb. 7 Daytona Beach Half Marathon & Relay – 6:45 a.m. start
- Sunday, Feb. 7 3.1 mile (5K) Lap the Track – 7:00 a.m. start

✓ Registration Type		Early Bird	Regular	Late
		7/1-11/30	12/1-1/31	2/1-Race Day
CHECK EVENT	<input type="checkbox"/> 3.1 mile (5K) Lap the Track	\$20	\$25	\$30
	<input type="checkbox"/> Half Marathon	\$75	\$85	\$95
	<input type="checkbox"/> Relay (Per team member)	\$60	\$70	\$80
Team name: _____				
Relay team type: <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE <input type="checkbox"/> CO-ED				

*Please print legibly as this form will be used for important race communications.*

FIRST: \_\_\_\_\_ LAST: \_\_\_\_\_

EXPECTED FINISHING TIME: \_\_\_\_\_

MALE    FEMALE   RACE DAY AGE: \_\_\_\_\_   DATE OF BIRTH \_\_\_\_ / \_\_\_\_ / \_\_\_\_

HAND CYCLE DIV.    WHEELCHAIR DIV.

STREET ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ EMAIL: \_\_\_\_\_

T-SHIRT SIZE:    Men's Small    Men's Medium    Men's Large    Men's XL    Men's XXL  
*(check one)*    Women's XS    Women's Small    Women's Medium    Women's Large    Women's XL    Women's XXL

**MAKE CHECK PAYABLE TO: VOLUSIA COUNTY GOVERNMENT**

**MAIL TO: Volusia County 123 W. Indiana Ave., DeLand, FL 32720 Attn: Race Entry**

NOTE: Entry fees are non-refundable and race numbers are non-transferable.

**INCOMPLETE OR UNSIGNED ENTRY FORMS WILL NOT BE ACCEPTED.**

*In consideration of my entry being accepted, I intend to be legally bound, and hereby for myself, my heirs, and executors, waive all rights and claims for damages which may hereafter accrue to me against Daytona International Speedway, LLC, its parent, their subsidiaries, limited liability and affiliated companies, and their respective shareholders, members, directors, officers, employees, agents, sponsors, volunteers, the Daytona Beach Racing & Recreational Facilities District, the City of Daytona Beach, Running Zone Race Management and the County of Volusia for any and all damages or injuries which may be sustained and suffered by me in consideration of my association with an entry or participation in the Daytona Beach Half Marathon and related events. If I should suffer injury or illness, I authorize the officials of the race to use their discretion to have me transported to a medical facility, and I take full financial and legal responsibility for this action. I attest and verify that I am physically fit and have my physician's permission to participate in this race. I hereby grant full permission to any and all of the foregoing to use any photographs, videotapes, or any other record of this event for any purpose of the event whatsoever. I have read the above release and understand that it presents a risk of physical injury, knowing this I am entering this event at my own risk.*

SIGNATURE

SIGNATURE OF PARENT FOR THOSE UNDER 18

DATE \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**START YOUR ENGINES AND GET READY FOR A GREAT RACE!**