

THE NEW MANILA RUN 2016 – FEBRUARY 21, 2016 – SUNDAY Assembly time: 4:00AM
BARANGAY MARIANA , 4TH ST. & NEW JERSEY, NEW MANILA - QUEZON CITY

GUN START: 10K - 5:15AM 5K - 5:20AM 3K - 5:30AM



ENTRY FEE: 10K 500 5K 450 3K 400

STUDENT 30% - SENIOR 20% - PWD 40% DISCOUNT

RACE PACKET INCLUDE: RACE BIB, T-SHIRT

ALL FINISHERS: SOUVENIR SHIRT, FREEBIES

First Name		Last Name	
<input type="text"/>		<input type="text"/>	
Address (No. and Street)			
<input type="text"/>			
City		Province/State	
<input type="text"/>		<input type="text"/>	
Country	Postal Code	Nationality	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Birth Date (MM/DD/YY)	Age on Race Day	Sex	Team/Club
<input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="text"/>
Contact No.: Mobile	Contact No.: Home	Contact No.: Business	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Occupation	Email Address		
<input type="text"/>	<input type="text"/>		
Race:			
<input type="checkbox"/> 3K <input type="checkbox"/> 5K <input type="checkbox"/> 10K			

WAIVER OF LIABILITY

I acknowledged that a running event is a potentially hazardous activity and I should not enter unless I am medically able and properly trained. I assume the risks of participating in the NEW MANILA RUN but not limited to; falls, contact with other participants, the effect of the weather, traffic on the course, and the condition of the roads/streets, all such risk being known and appreciated by me. Having read this waiver, and knowing these facts and in consideration of you accepting my entry. I for myself and anyone entitled to act on my behalf, waived and released Barangay Mariana Officials, Its Organizer, Director, Committees, Event Sponsors, Volunteers and Professionals associated with this event or localities in which segment of events are held from all claims or liabilities of any kind, and arising out of my participation even though that liability may arise out of negligence or carelessness on the part of the persons/organization named in this waiver. I grant and affirm that I am 18 years of age or older. I have read this document and understand its contents.

(I HAVE CAREFULLY READ THE ABOVE AND CERTIFY THAT THIS IS A LEGAL DOCUMENT)

Contact nos. 02 7224968 / 02 4135483 / 09205367038

SIGN OVER PRINTED NAME PARENT/ GUARDIAN CONSENT <18 DATE / 09399089022 / 09399349524 / 09178315677