

# 2020 Osaka Women's Marathon

## OFFICIAL ENTRY FORM

Sunday, January 26, 2020

Family name  First name

Date of Birth  Year  Month  Day  Age as of 1/26/2020  Single  Married  Nationality

Address  Street  City

Country  Postal Code

Height  cm Weight  kg.

Telephone Home  Business  Fax

E-mail address

Running club

Occupation

Your personal best time in Marathon  Hr.  Min.  Sec. Rank

Name of the Race

Date of the Race  Year  Month  Day

Qualifying time in  Marathon,  30km,  Half Marathon,  10km, from January 1, 2018 to December 11, 2019.

\*Qualifying time must be run on or after January 1, 2018 at a certified races.

Hr.  Min.  Sec. Rank

Name of the Race

Date of the Race  Year  Month  Day

In consideration of your acceptance of this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors, and administrators waive and release any and all rights and claims for damages I may have against the Organizing Committee, Japan Association of Athletics Federations, Osaka Association of All Athletes, the official governing body of sports in my country, as well as the race director or any of his appointed staff, Kansai Telecasting Corp., The Sankei Shimbun, Osaka Broadcasting Corp., Osaka Prefectural and City Governments, officials, their representatives, successors, and assignees for any and all injuries suffered by me in the 2020 Osaka Women's Marathon. I attest and verify that I am an amateur as defined by the IAAF. rules, and physically fit and have sufficiently trained for this competition, and such physical condition has been verified by a licensed medical doctor. Further, I hereby grant full permission to the Organizing Committee and their authorized agents to use any photos, video tapes, motion pictures, recording and any other records of this event or other functions in connection with this event for any legitimate purposes.

**SIGNATURE** (To be signed by athlete)

\_\_\_\_\_

**DATE**

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