

Mississippi Track Club Katrina Relief Marathon

6:00 a.m. - Sunday, April 23, 2006

Natchez Trace Parkway, South,
Clinton, Mississippi

*All proceeds donated to the
American Red Cross Disaster Relief Fund*



COURSE: USATF certified (MS98002RH) and sanctioned. Begins and ends at first rest stop on Natchez Trace Parkway at Clinton, MS, and follows an out and back course along the Natchez Trace Parkway. Water and gatorade will be provided every 4 miles. Portable restrooms available on the course and at start/finish.

ENTRY FEES: \$26 (Individual) or pledges totalling at least \$100 (Relay Team).

ON-SITE CHECK IN & PACKET PICKUP: First rest stop on Natchez Trace Parkway, South, Clinton. Pre-registration postmarked by April 17; Race day registration will start 5:15 a.m. Sunday, April 23.

POST-RACE REFRESHMENTS: Fruit, Cookies, Soft Drinks, Gatorade.

COMMEMORATIVE MEDAL AND T-SHIRT AWARDED TO ALL MARATHON FINISHERS

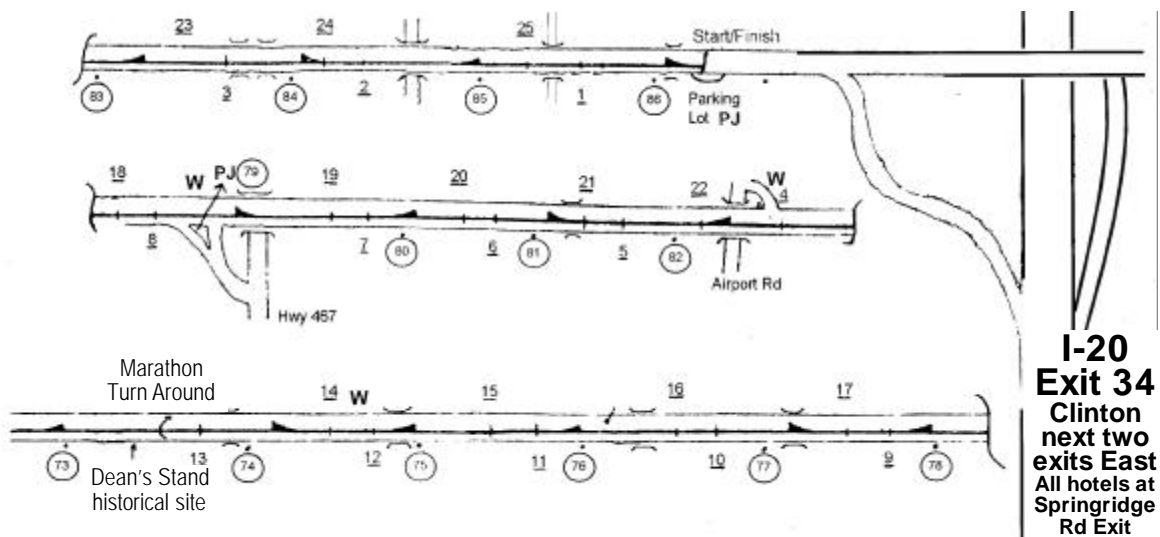
CLINTON MOTEL ACCOMMODATIONS:

COMFORT INN ---- 924-9364
DAYS INN ---- 924-7243
HAMPTON INN ---- 925-9393
HOLIDAY INN EXPRESS ---- 924-0064
RAMADA LIMITED ---- 925-4040

**For more information, call the MTC
Hotline 856-9884.**

MAP OF MARATHON COURSE

(Begins and ends at first rest stop on Natchez Trace Parkway, South, Clinton, MS)



**I-20
Exit 34
Clinton
next two
exits East
All hotels at
Springridge
Rd Exit**



**Mississippi
Track Club**

www.mstrackclub.com



**THERE IS A 7 HOUR LIMIT FOR CLOCK.
FINISH LINE WILL CLOSE AT 1:00 P.M.**

Katrina Relief Pledge Work Sheet

Pledge Name/Relay Runner Signature	Pledge per mile	Miles completed	Amount Donated
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
13.			
14.			
TOTALS			

MISSISSIPPI TRACK CLUB KATRINA RELIEF MARATHON Sunday, April 23, 2006 ENTRY FORM

(Mail entry form and check to **MTC, P.O. Box 1414, Ridgeland, MS 39157**. For more info call: 601-856-9884.)

Name _____ Age _____ Sex _____

Address _____ City _____ State _____ Zip _____

Home Phone _____ Business Phone _____ T-shirt size(while they last): M L XL

Circle Event: Marathon Run Marathon Walk Expected Finish Time _____

How many marathons have you entered? _____ Completed? _____ Your Marathon PR? _____

Are you a Relay Team? Yes ___ No ___ Team Name _____

WAIVER: In consideration of your acceptance of this entry, I hereby for myself, my heirs, my executors, and administrators, waive any and all rights and claims for damages I may have against the Mississippi Track Club, Inc., Natchez Trace Parkway and any individuals associated with this event, for any and all injuries or death suffered by me in connection with said event. I hereby certify that I am adequately trained and fit to run in this race and I fully understand that my participation in this event is a completely voluntary undertaking of my own choosing, and further, I fully understand that in so doing, I assume all risks involved in this event. In completing this form, I acknowledge that I am an amateur in such events. I also give permission for the free use of my name and picture in any broadcast, telecast, or print media account of this event. I acknowledge that I have read and fully understand my own liability and do accept the restrictions.

OFFICIAL USE ONLY

Signature _____ Date _____
(Signature of Team Captain if Relay Team)