

ENTRY FORM - Events 2, 3, 4, 5, 6, 7, 8 Saturday 13 & Sunday 14 February 2010

Please indicate which EVENT you are entering and PRINT CLEARLY IN BLOCK LETTERS

Saturday, 13 February 2010

- EVENT 2 - Company Team 09:45
 EVENT 3 - Non Company Team 11:00
 EVENT 4 - Family Team 12:15

Sunday, 14 February 2010

- EVENT 5 - Girls 13 yrs & under, Women 31 yrs+ 08:30
 EVENT 6 - Boys 13 yrs & under, Men 31 yrs+ 09:45
 EVENT 7 - Women 14 - 30 yrs 11:00
 EVENT 8 - Men 14 - 30 yrs 12:15

PERSONAL INFORMATION

Identity No.: _____ Date of Birth: **YYYY / MM / DD** _____ Gender: M F

First Name: _____ Surname: _____

Postal Address: _____

Postal Code: _____

Number of years completed the Midmar Mile? _____

Phone (Home): _____ Phone (Work/School): _____

Cell: _____ E-mail: _____

If scholar, **Full Name of School** in 2010: _____ **(Events 5, 6, 7 & 8 ONLY)**

I am entering as an: Individual In a School Team Grade in 2010

Please enter the name of your registered swimming club: _____

SSA Reg. No.: _____

MEDICAL

Special Medical Conditions: _____

Are you on Medical Aid?: Y N Medical Aid Name: _____

Medical Aid No: _____

SEEDING

Name of Seeding Event: _____ Time: **HH : MM : SS** _____

Date of Event: **YYYY / MM / DD** _____

Only times from the official seeding events may be used. Official Seeding Events will be listed on www.midmarmile.co.za

TEAM INFO

(Events 2, 3 & 4) - N.B. Please send in team entries together to help improve communication

Team Name: _____ Name of Team Captain: _____

Each member must complete an entry form. Minimum of 3 entrants and maximum of 5 entrants per team. **ONLY** the designated team captain must collect the Team's Race Numbers & Caps. The team captain must be entered into the event.

ENTRY FEE

EVENTS 2 to 8 - Online entries available at www.midmarmile.co.za

Posted by	Wed, 18 Nov 2009	R95	_____
Posted by	Wed, 16 Dec 2009	R110	_____
Received by	Wed, 20 Jan 2010	R135	_____
Liberty Midlands Mall Entries	Wed, 10 to Fri, 12 Feb 2010	R175	_____
Midmar Dam Entries	Sat, 13 & Sun, 14 Feb 2010	R220	_____
Swimmers Fund Donation	(refer to back page)		_____
Total			_____

Entry fees are per person per event. Entry fees will not be refunded under any circumstance. All entry fees are inclusive of VAT. Please enclose your entry fee with your completed entry form. Cheques and Postal Orders are to be made payable to MIDMAR MILE. Post dated cheques and entries without fees will not be accepted.

INDEMNITY

RELEASES & WAIVER
 In consideration of the acceptance of my entry I, for myself, executors, heirs, administrators and assigns, do hereby release and discharge Midmar Mile and all its sponsors, any and all voluntary groups, all medical personnel any and all authorities from all claims for injuries, damage and property loss I may suffer caused by negligence of any of them and arriving out of my participation in the event including pre and post race activities. I am physically fit and sufficiently trained to participate in this event and assume all risks for participation. I accept all rules, conditions and regulations which includes terms of payment of entry fee and will comply with them. I also grant my permission to Midmar Mile and its authorised agents to use my name, photographs, video tape, broadcasts, telecasts, advertising promotion or other account of this event free of charge.

Signature: _____ Date: _____

If under 18 yrs: Parent or Guardian to sign.

Entry Form - Event 1

Saturday 13 February 2010

Please indicate which EVENT you are entering and PRINT CLEARLY IN BLOCK LETTERS

Saturday, 13 February 2010

- | | | | |
|--|-------|--|-------|
| <input type="checkbox"/> Seals Ironman / Ironwoman | 08:30 | <input type="checkbox"/> Seals Comrades Biathlon | 08:30 |
| <input type="checkbox"/> Disabled | 08:30 | <input type="checkbox"/> Seals Dusi Biathlon | 08:30 |

PERSONAL INFORMATION	Identity No.:	Date of Birth: Y Y Y Y / M M / D D	Gender: M <input type="checkbox"/> F <input type="checkbox"/>
	First Name:	Surname:	
	Postal Address:		
	Province:		Postal Code:
	Number of years completed the Midmar Mile?		
	Phone (Home):	Phone (Work/School):	
	Cell:	E-mail:	
	Please enter the name of your registered swimming club:		
	SSA Reg. No.:		

DIS	Disability Category:	Mentally <input type="checkbox"/>	Visually <input type="checkbox"/>	Physically <input type="checkbox"/>
	Official Disability category if available:			

T-SHIRT	T-SHIRT (only for entries received by Wednesday 20 January 2010)				
	Small <input type="checkbox"/>	Medium <input type="checkbox"/>	Large <input type="checkbox"/>	X Large <input type="checkbox"/>	XX Large <input type="checkbox"/>

INFO	2009 Comrades Time: H H : M M : S S	Race No.:
	2010 Dusi Marathon Time: H H : M M : S S	Boat No.:

MEDICAL	Special Medical Conditions:	
	Are you on Medical Aid?: Y <input type="checkbox"/> N <input type="checkbox"/>	Medical Aid Name:
	Medical Aid No:	

SEEDING	Name of Seeding Event:	Time: H H : M M : S S
	Date of Event: Y Y Y Y / M M / D D	

Only times from the official seeding events may be used. Official Seeding Events will be listed on www.midmarmile.co.za

ENTRY FEE	IRONMAN / IRONWOMAN / BIATHLONS			
	Received by	Wed, 20 Jan 2010	R175 (including T-shirt)	<input type="text"/>
	Liberty Midlands Mall Entries	Wed, 10 to Fri, 12 Feb 2010	R220 (NO T-shirt, Medal NOT guaranteed)	<input type="text"/>
	Swimmers Fund Donation	(refer to back page)		<input type="text"/>
	Total			<input type="text"/>
	DISABLED			
	Received by	Wed, 20 Jan 2010	R95 (including T-shirt)	<input type="text"/>
	Liberty Midlands Mall Entries	Wed, 10 to Fri, 12 Feb 2010	R175 (NO T-shirt)	<input type="text"/>
	Midmar Dam Entries	Sat, 13 & Sun, 14 Feb 2010	R220 (NO T-shirt)	<input type="text"/>
	Swimmers Fund Donation	(refer to back page)		<input type="text"/>
Total			<input type="text"/>	

INDEMNITY	<small>RELEASES & WAIVER</small> In consideration of the acceptance of my entry I, for myself, executors, heirs, administrators and assigns, do hereby release and discharge Midmar Mile and all its sponsors, any and all voluntary groups, all medical personnel any and all authorities from all claims for injuries, damage and property loss I may suffer caused by negligence of any of them and arising out of my participation in the event including pre and post race activities. I am physically fit and sufficiently trained to participate in this event and assume all risks for participation. I accept all rules, conditions and regulations which includes terms of payment of entry fee and will comply with them. I also grant my permission to Midmar Mile and its authorised agents to use my name, photographs, video tape, broadcasts, telecasts, advertising promotion or other account of this event free of charge.	
	Signature:	Date:

If under 18 yrs; Parent or Guardian to sign.