



# 2015 Indoor Team & Individual Marathon

### Saturday, February 14, 9:00 am Campbell County Recreation Center Field House 250 Shoshone Ave Gillette, Wyoming 82718

#### Race Info:

The course for the team marathon will be 211 laps on the indoor track (200 meters per lap) in the Campbell County Recreation Center Field House. Individuals will run 186 laps in lane 5. There will be an aid station on the course every lap and music throughout the entire 26.2 miles. Teams will consist of 6 individuals, 3 men and 3 women, five running 35 laps and one runner 36 laps. **Pacing runners will not be allowed.** Individuals on a team can only participant on one team. Individual marathon runners cannot participate on a team. CCPR can guarantee perfect weather (64F), flat course and no wind!

#### Lap Counting:

Each relay team and individual runner will be responsible to provide an individual to count laps and record it. **Field Size:** 

There will be a maximum of 30 relay teams and 12 individual marathoners able to compete in the event. **Registration:** 

**Registrations will close on Saturday, February 14 at 8:15 am or until the max of 30 teams and 12 individuals marathoners has been reached.** If we receive your registration by mail after the field of 30 teams is reached, we will promptly return your registration fee.

#### Race Fee:

\$85.00 Fee for teams and \$25 for individuals will include a t-shirt and finisher's medal.

#### Awards:

Awards will be given to the top three teams and top three male and female individual marathoners. Because of the small field, there will be no age group awards.

**Best Team Area Contest:** Each team is encouraged to decorate their team area for the Indoor Team Marathon. Prizes will be given to the best decorated area. Let's get creative.

#### **Aid Stations:**

There will be 1 aid station on the track throughout the event. Runners are required to bring their own water bottles, sports drink, gels, food, etc. Water will be available throughout the event.

#### Sponsors:

Campbell County Parks and Recreation All Dimensions Fitness Center

#### **Additional Information:**

For additional information and updates please call Rick Mansur 307-682-8527.





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Team Name			
Individual Marathon Runner N	lame		
Address			
City	State	Zip	
Phone Number	Email Address		
Shirt SizesS	ML	XL	XXL
Make check payable to CCPR	\$85.00 Team Entry Fee	\$25 Individı	ual Marathon Runner

IN CONSIDERATION OF YOUR ACCEPTING THIS ENTRY OR REGISTRATION, I HEREBY WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES MY CHILD OR I MAY ACCRUE AGAINST CAMPBELL COUNTY OR ITS DEPARTMENTS OR EMPLOYEES, SPONSORS AND REPRESENTATIVES, SUCCESSORS, AND ASSIGNS FOR ANY AND ALL INJURIES SUFFERED BY MYSELF OR MY CHILD WHILE PARTICIPATING IN THIS ACTIVITY. I UNDERSTAND THAT INJURIES MAY INCLUDE BUT ARE NOT LIMITED TO: BROKEN BONES, CONCUSSIONS, INJURIES TO JOINTS, SPINAL INJURY, BROKEN TEETH, LOSS OF VISION, INJURY TO INTERNAL ORGANS, EXPOSURE TO WEATHER CONDITIONS AND PROBLEMS CAUSED BY PHYSICAL STRESS.

Individual Marathon Runner Name	Signature	Date
Sixth Team Member Name	Signature	Date
Fifth Team Member Name	Signature	Date
Fourth Team Member Name	Signature	Date
Third Team Member Name	Signature	Date
Second Team Member Name	Signature	Date
First Team Member Name	Signature	Date