

ING NEW YORK CITY MARATHON 2005 GUARANTEED ENTRY APPLICATION

Please complete one application form per person. Please return this form along with a signed "Authorization to sign 2005 ING NYC Marathon Application/Waiver Form" and return by fax to Elaine Tomiszer at 905 377 8189. Incomplete applications will not be accepted. We will contact you to confirm your reservation and entry position. **PLEASE PRINT NEATLY, WE ARE NOT RESPONSIBLE FOR SPELLING ERRORS ON YOUR ENTRY IF WE CANNOT READ YOUR WRITING!!!**

PERSONAL INFORMATION:	
Surname:	First name:
IMPORTANT: Please enter your name EXACTLY as it appears on your passport. Air Tickets and Marathon Entry must match your Passport Thomas Cook Travel is not responsible if you are denied boarding or entry due to a discrepancy.	
Address:	
City:	
Province	Postal code:
Home telephone:	Business telephone:
Email address:	
Country of residence:	
Country of citizenship:	
Date of birth: dd/mmm/yy	Gender: female <input type="checkbox"/> male <input type="checkbox"/>

MARATHON INFORMATION:	
Predicted time for this race: hour/minutes/seconds	
Chip number (for chip owners only)	
Results magazine (optional at \$12.00 US) Yes <input type="checkbox"/> No <input type="checkbox"/>	
Unisex shirt size (for estimated purposes) S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/>	
OPTIONAL MARATHON INFORMATION REQUESTED BY THE NYRR:	
Do you wish to receive general NYRR email? Yes <input type="checkbox"/> No <input type="checkbox"/>	
Best marathon time since November 1, 2003 Race Name: hour/minutes/seconds	
Number of full 26.2 mile marathons you have completed:	
Occupation	Education
Marital status	

TRAVEL PACKAGES: Indicate which package you would like to book.	
1. FLIGHT, HOTEL & GUARANTEED ENTRY <input type="checkbox"/>	
Hotel Belvedere <input type="checkbox"/>	Best Western President <input type="checkbox"/>
Roosevelt Hotel <input type="checkbox"/>	Marriott Marquis <input type="checkbox"/>
Essex House <input type="checkbox"/>	Bedford Hotel <input type="checkbox"/>
Departure city:	
Departure date:	Return date:
Name of room mate:	

2. FLIGHT & GUARANTEED ENTRY <input type="checkbox"/>	
Departure city:	
Departure date:	Return date:
3. MOTORCOACH, HOTEL & GUARANTEED ENTRY <input type="checkbox"/>	
Requested pick-up city:	
Name of room mate:	
4. HOTEL & GUARANTEED ENTRY <input type="checkbox"/>	
Check-in date:	Check-out date:
Hotel Belvedere <input type="checkbox"/>	Best Western President <input type="checkbox"/>
Hotel Roosevelt <input type="checkbox"/>	Marriott Marquis <input type="checkbox"/>
Essex House <input type="checkbox"/>	Bedford Hotel <input type="checkbox"/>
Name of room mate:	
5. CUSTOMIZED PACKAGE: Please describe your specific requests including dates & mode of travel, specific hotel etc. We will contact you with a customized quote.	

TRAVEL INSURANCE: Travel Insurance rates vary depending on the cost of the package you choose. Please contact us for a quote and indicate your insurance needs BEFORE you return this application.
Deluxe Tour Package Insurance (covers Cancellation & Interruption, Out-of-Province Emergency Medical, Flight Accident, Travel Accident and Baggage) <input type="checkbox"/>
Non-Medical Package Insurance (covers Cancellation & Interruption, Flight Accident, Travel Accident and Baggage) <input type="checkbox"/>
I decline Travel Insurance <input type="checkbox"/>
Signature: (mandatory)

PAYMENT:	
Cheque <input type="checkbox"/>	Visa <input type="checkbox"/>
	Mastercard <input type="checkbox"/>
Card number:	Expiry date: (07/05 or later)
Name on card:	
I hereby authorize Thomas Cook Travel to charge my credit card on the due dates and for the due amount.	Signature:
DEPOSIT NOW: \$550.00 (Canadian) \$500.00 (packag#3)	
FINAL PAYMENT IS DUE ON OR BEFORE July 18, 2005	
Your credit card number will be used for Chip Deposit (\$35.00 US) if you fail to return your timing chip after the marathon.	
A Confirmation/Receipt will be mailed to you once we process your application. You will receive a Race Card & full details of your package via courier approximately 2 weeks before the marathon.	
Note: If your credit card is declined, there will be a \$25.00 administration fee to re-apply for authorization. Declined credit cards may result in the cancellation of your entry.	

AUTHORIZATION TO SIGN 2005 ING NYC MARATHON APPLICATION/WAIVER

It is important that you read and then sign, date and return this document to your Tour Operator. This is part of the application process to be completed, which includes the WAIVER set forth below.

“By signing this letter, you authorize the Tour Operator (Thomas Cook Travel Ltd) from whom you purchased your 2005 ING NYC Marathon package to act on your behalf to complete and sign your 20045ING NYC Marathon application and the following WAIVER.”

2005 ING New York City Marathon® Waiver

I know that participating in the New York City Marathon® (the "Marathon") and/or the Continental Airlines International Friendship Run (collectively the "Events") is a potentially hazardous activity. I agree not to enter and participate unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the Events. I am voluntarily entering and assuming all risks associated with participating in the Events including, but not limited to, falls, contact with vehicles, other participants, spectators or others, the effect of weather, including high heat, extreme cold, and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts, and in consideration of your accepting my application, I, for myself and anyone entitled to act on my behalf, waive and release the Road Runners Club of America, New York Road Runners Club, Inc., the City of New York and its agencies, USA Track & Field and its constituent chapters, all Sponsors of the Events and each of the respective representatives and successors, officers, directors, members, agents and employees of the foregoing, from all present and future claims or liabilities of any kind, known or unknown, arising out of my participation in the Events even though that liability may arise out of ordinary negligence or fault on the part of the persons named in this Waiver.

I grant my permission to all of the foregoing to use or authorize others to use photographs, motion pictures, recordings, or any other record of my participation in the Events for any legitimate purpose without remuneration.

By: _____
Print Name

Signature

Date