



Tenzing-Hillary Everest Marathon

May 29, 2010



Entry Form

Please complete this form with English BLOCK letters.

Family Name:			
First Name:	Gender	M <input type="checkbox"/>	F <input type="checkbox"/>
Nationality:	Birthday	D <input type="text"/>	M <input type="text"/> Y <input type="text"/>
ID/Passport No.:	Day Time Telephone No.:	Fax No.:	
Correspondence Address:			
Current E-mail Address:			
Emergency Contact No. or Place:			

Declaration

I hereby accept the race rules, confirm the validity of my personal information and certify that I am in good health and have sufficiently trained for this race. I authorize the Organizing Committee or trekking staff to provide medical attention for me when needed, and agree that I may be taken out of the race in case of danger or damage to my health.

Liability Release Agreement :

- I understand and hereby acknowledge that there are inherent and other risks involved in adventure vacations and activities of this kind and I freely and voluntarily assume these risks.
- I agree to hold harmless and indemnify Organizing Committee, HIMALAYA Expeditions and any of their guides, leaders, employees, officers, directors, owners, associates, affiliated companies, manufactures of equipment, and subcontractors, for any loss or damage, including any that results from any claim for personal injury, death, or property damage. I do hereby expressly agree to defend the above-named parties against any kind of the liability, actions, causes of action, debts, suits, claims, and demands of any kind whatsoever, including attorney's fees, which I or my heirs, assignees, successors, or legal representatives may now have or which may hereafter arise out of our in connection with my trip or participation in activities arranged for my by the above-named parties.
- I hereby release and forever discharge, HIMALAYA Expeditions, Race Organizing Committee, Bikrum Pandey and any of their guides, leaders, agents, employees, officers, directors, owners, associates, affiliated companies, manufacturers of equipment, and subcontractors, from any and all liabilities for damage and injury or death to myself from any claim based upon negligence, recklessness, breach of warranty, contract or other legal theory, accepting for myself, my heirs, assignees, administrators, executors, and all members of my family, including minors accompanying me, full responsibility for any and all such damage, injury or death which may result.
- I also covenant not to sue or make a claim against any of the above-mentioned parties.
- The terms of this agreement shall be binding upon myself, my heirs, assignees, and executors and all members of my family, including minors accompanying me.
- I agree that the Organizing Committee of this race could use any photographs of film clips of me without compensation.
- I also agree that passing my number bib to any other person would lead to my disqualification.

Signature: _____

Date: _____

Guardian's signature if under the age of 18

Name:	Signature:	Relationship:
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Important Notes

Tenzing-Hillary Everest Marathon is open to everyone, provided they have approved physical stoutness and hold the legal document of identification.

Entry Fee is non-refundable.

- ▶ The Entry Form should be submitted with a copy of the identification document (passport or I.D. card).
- ▶ Cash, Credit Card & Bank Draft will be accepted for Entry Fee payment.
- ▶ Registration by mail should be paid in the form of bank draft only and mail to together with the completed Entry form. Anyone age of 18 or above is eligible for participation.
- ▶ Such Bank Draft should be made payable to : HIMALAYA Expeditions.

Collection of Chest Number and T-shirt

- ▶ Athletes should present their I.D. card or passport to collect the Chest Number and T-shirt at the HimEX Nepal, Kathmandu Office.
- ▶ Marathon runners should have to wear the Official T-shirt during the race.

For more information, please refer to the event's promotional pamphlet and Race Regulations, or visit our website

www.EverestMarathon.com

For official use only

Normal	Double	Cash	Bank Draft
Draft No.:	Bank Name:	Euro	Pound
		US \$	
Receipt No.:	Received by (name):	Date:	
Card No.:			
Official's Name:	Date:		