



- Attention! First Name required!
- Attention! Last Name required!
- Attention! Gender required!
- Attention! Invalid birthdate! (e.g. 11/14/1974)
- Attention! Email must be a valid address! (e.g. me@xyz.com)
- Attention! Day Phone must be a valid telephone number! (e.g. 858-555-1234)
- Attention! Street Address required!
- Attention! City required!
- Attention! State required!
- Attention! Zip must be a valid zip code! (e.g. 90210)
- Attention! "Employment status" required!
- Attention! "I understand that the Marine Corps Marathon has a no refund policy"

**HELP DESK**  
 For frequently asked question to contact cust support, click t

**Registration Steps:**

- ▶ 1. Accept Waiver ▶ 2. Complete Form ▶ 3. Submit Payment ▶ 4. Print Receipt

**TEST ONLY Marine Corps Marathon 10k**

**PARTICIPANT INFORMATION**

(\* indicates required information)

First Name: *	<input type="text"/>
Middle Name:	<input type="text"/>
Last Name: *	<input type="text"/>
Gender: *	<input type="radio"/> Male <input type="radio"/> Female
Birthdate: *	MM / DD / YYYY
Email: *	<input type="text"/>
Enter Email Again: *	<input type="text"/>
Day Phone: *	XXX-XXX-XXXX ext. <input type="text"/>
Evening Phone:	<input type="text"/> ext. <input type="text"/>
Street Address: *	<input type="text"/>
City: *	<input type="text"/>
State: *	<input type="text"/> Outside USA: <input type="text"/>
Country: *	United States <input type="text"/>

Zip: \*

Employment status \*

Champion Chip Number?

**NO REFUND POLICY**

I understand that the Marine Corps Marathon has a no refund policy \*  Yes

Carbo Dining-In  Yes  No

Pasta Dinner at 4:30 PM  Yes Qty.  @ \$26.00 ea.

Pasta Dinner at 6:15 PM  Yes Qty.  @ \$26.00 ea.

**▶▶ CONTINUE**