

# RUN WITH MARINES

# MCM Kids Run

44TH MCM ▼

REGISTRATION

MCM

*Privacy Act Statement -*

*Authority: 10 U.S.C. 5041, Headquarters, US Marine Corps; Marine Corps Order P1700.27B, Marine Corps Community Services Policy Manual (MCCS); Marine Corps Marathon Charter effective 27 Mar 2007; and SORN MMC00010.*

*Purpose: To register, acknowledge and promote participation in Marine Corps Marathon Organization events. Information is used to plan, organize, coordinate and execute the events and communicate with the runners and volunteers before, during and after the event to include publication of finisher results, finisher certificates and race photographs, videos and motion pictures. Data and photographs, videotape, motion pictures and other recordings may be used by the Marine Corps Marathon Organization and its select sponsors for surveys, publications on websites, race programs and promotions, newspaper articles, newsletters and other race marketing purposes and runner enhancements.*

*Routine Uses: Information is accessed by Marine Corps Marathon Organization personnel with a need to know to meet the purpose. Information may be provided to television, online and print media to provide publicity on the Marine Corps Marathon Organization events and to selected sponsors approved by the Marine Corps Marathon Organization. A complete list and explanation of the applicable routine uses is published in the authorizing SORN available at <https://dpcl.d.defense.gov/Privacy/SORNs/Index/DOD-wide-SORN-Article-View/Article/570650/mmc00010/>.*

*Disclosure: Voluntary. However, failure to provide the information may result in ineligibility to participate in the Marine Corps Marathon Organization events.*

*Agency Disclosure Statement -*

*The public reporting burden for this collection of information, 0703-0053, is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or burden reduction suggestions to the Department of Defense, Washington Headquarters Services, at [whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil](mailto:whs.mc-alex.esd.mbx.dd-dod-information-collections@mail.mil). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number.*



## MCM Kids Run

Brought to you by **Marine Corps Marathon Organization**

### DATE

Saturday, October 26, 2019 at 09:00 AM

### DAYS LEFT TO REGISTER

310

### ADDRESS

Arlington Memorial Drive  
3910 WILSON BLVD  
Arlington, VA 22203-1922

### \* REGISTERING FOR

MCM Kids Run

\$10.00

SATURDAY, OCTOBER 26, 2019 AT 09:00 AM

### CHOOSE WAVE

Wave 1 (Open)

### \* PARTICIPANT NAME

An

m

Mmmmm

### \* GENDER

Male

### \* DATE OF BIRTH

January

1

2012

Looks like this participant is under 18

A parent or guardian will need to register on behalf of this participant.

Enter your information below to complete the registration for the minor.

### YOUR RELATIONSHIP TO MINOR

Father

**\* PARENT/GUARDIAN NAME**

MI

Last Name

**\* PARENT/GUARDIAN EMAIL**

ex: jdoe@gmail.com

**\* PARENT/GUARDIAN ADDRESS**

United States



Street Address

Apt, Suite, Unit

City

Virginia



Zip

**\* PARENT/GUARDIAN PHONE NUMBER**

ex: (555) 555-5555

**\* ARE YOU THE EMERGENCY CONTACT?**

YES



**\* EMERGENCY CONTACT NAME**

**\* EMERGENCY CONTACT PHONE**

ex: (555) 555-5555

**\* EMERGENCY CONTACT NAME**

**\* EMERGENCY CONTACT PHONE**

ex: (555) 555-5555

**\* EMERGENCY CONTACT RELATIONSHIP**

Please Select



**\* ARE YOU AFFILIATED WITH A MILITARY BRANCH?**

**\* WHAT PARTICIPATION CATEGORY APPLIES TO YOUR CHILD?**

Please Select



Next Step

### 3 Payment

Almost done! Don't forget to review the summary of your information before completing your registration.

An Mmmmm MCM Kids Run	\$10.00
	PROCESSING FEE \$1.00
	TOTAL <b>\$11.00</b>

  

* NAME ON CARD	* CREDIT CARD NUMBER
<input type="text"/>	<input type="text" value="Card number"/> <input type="text" value="MM / YY"/>

- I have read and agree to the [No Refund Agreement](#)
- I have read and agree to the [Privacy Act Statement](#)
- I have read and agree to the [Liability and Publicity Release](#)
- I have read and agree to the [Agency Disclosure Statement](#)

Register & Pay \$11.00

## No Refund Agreement

RUNNER - PLEASE READ -- All Entry fees and purchases are NON-REFUNDABLE. Once we receive and accept your entry/purchase, you will not receive a refund from the MCMO or our partners if you cannot participate. You may not just give or sell your number to anyone, unless you do this through the proper transfer process approved by the MCMO, and only if this option is applicable to the event in question.

## Liability and Publicity Release

For considering my entry's acceptance in the MCMO Event, I the undersigned, intending to be legally bound, waive and release for myself, my heirs, executor and administrators, any and all rights and claims for damages, demands and any other actions, which I may have against the US Marine Corps, US Government, National Park Service, volunteer medical support, all participating supporting agencies, sponsors and those entities' representatives, successors and assignees, from my participation in the event, including any and all injuries suffered by me because of my participation in this event. I verify I have full knowledge of the rigors of this race and the risk involved in participation, including but not limited to trip and fall, loss of orientation, exhaustion, dehydration, hyponatremia, fatigue, over-exertion, sun or heat stroke, cold injuries, hypothermia, and any other injuries related to running and/or endurance events. I assert that I am physically fit and have sufficiently trained to complete this event. I realize medical support for this event will consist of primarily of volunteer medical personnel prepared to administer first-aid type assistance along the race course and the finish line.

The MCMO Events are open to all people who are physically fit. However, running is not recommended for people below the age of 10. It is also recommended anyone over the age of 35 and/or with a family history of heart disease consult with their physician before undertaking the event.



*OMB#0703-0053*

*Expires on: XX-XX-XXXX*

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