

Postal Entry

First Name(s): _____ Last Name: _____

Email: _____

Gender: Male ↑ Female ↓

Date of Birth (dd/mth/yr) _____ Age on Race Day _____

T-shirt Size: X Small Small Medium Large ↑ X Large ↑

Club: _____

Mobile Number: _____ Home Number: _____

Address: _____

County: _____

Country: _____

"I declare that I am entering this run of my own choosing and no liability will be placed on the organisers for any injury sustained or property lost whilst participating in the event. I confirm that I have no medical disabilities which would endanger myself or others taking part."

Signed _____ Date _____

**Please post completed Entry Form and correct entry fee (cheque or bank draft)
to: River Moy Marathon, 35 The Moorings, Ballina, Co.Mayo, Ireland.**