HAWAIʻI PACIFIC HEALTH
GREAT ALOHA RUN
KE KUKINI ME KE ALOHA PAUʻOLE

Monday, February 17, 2020, Presidents' Day

36th Anniversary OFFICIAL ENTRY FORM

Visit us at: www.greataloharun.com

For Official Use Only

1. Complete legibly and completely. Everyone on the course must be registered. One form per person, except a baby in a stroller must register on the adult's form.

First Name | Last Name

Email Address

Sex: ☐ Male ☐ Female | Age on 2/17/20 | Date of Birth: Month / Day / Year

Address | Apt No.

Address Line 2

City | State | Zip / Postal Code | Country, if other than USA

Best Contact Number Including Area Code | Emergency Number on Race Day Including Area Code | Emergency Contact Name

Please select estimated finishing time corral:

- ☐ **1:14 or Under** (9 minute mile or less pace)
- ☐ **1:15 - 1:30** (9 - 11 minute mile pace)
- ☐ **1:31 - 1:55** (11 - 14 minute mile pace)
- ☐ **1:56 - 2:27** (14 - 18 minute mile pace)
- ☐ **2:28 - 3:00** (18 - 22 minute mile pace)
- ☐ **3:01 and over** (22 minute mile or more pace)
- ☐ **Stroller** (Pusher of stroller is required to start in 3:01 finishing time corral)

100 Club Code

Free Bus to Downtown: (Check only one please) ☐ Before ☐ After ☐ Waikiki Shuttle (check here)

T-shirts Awarded to Finishers Only! (Unisex sizes). Finisher shirts are not available for babies in strollers. Size selection is final.

Youth Sizes: ☐ Y Med ☐ Y Lrg

Adult Sizes: ☐ S ☐ M ☐ L ☐ XL ☐ XXL

*2. **Check box. Entry Donation is non-refundable and non-transferable***

2020 ENTRY DONATION LEVELS

Postmark Your Entry by **Jan. 24, 2020** (No paper entries accepted after this date.)

☐ $10 **Per Baby** 4 years and younger, pushed in stroller. Untimed ....

Baby name 1

Baby name 2

☐ $25 **Child** 5-12 years and **Senior** 65 years and older .....

MILITARY (Must show ID at Packet Pick-up)

BRANCH OF SERVICE (check one): ❑ **Air Force** ❑ **Army** ❑ **Coast Guard** ❑ **Marines** ❑ **National Guard** ❑ **Navy**

☐ $35 **Military Elite** (for Cash Prizes)
Active Duty/Reserves/National Guard (NO Dependent).....

☐ $35 **Military 13-64 Years**
Active Duty/Reserves/National Guard and Family, Retired & Dependent.....

INDIVIDUAL 13-64 (Includes Presidents' 100 Club)

☐ $40 **Individual Early Entry** July 7, 2019 – Nov. 29, 2019.....

☐ $45 **Individual Regular Entry** Nov. 30, 2019 – Jan. 24, 2020.....

☐ $60 **Individual Late Entry**.....
at HPH GAR EXPO, Feb. 15, 2020 – Feb. 16, 2020

☐ $60 **Virtual Runner Entry** Feb. 16, 2020.....

☐ $280 **Lucky 7 Team** (Must be age 21 or older, a Hawaii resident or Active Duty Military based in Hawaii).....

OPTIONAL SELECTIONS (Check all that apply)

☐ $8 **In Training Shirt Mailing Fee (US address only)**
(Must register by Nov. 29, 2019 to be eligible).....

☐ $11.95 **Souvenir Coin** (Must pick up at GAR Expo, Feb. 15-16, 2020).....

☐ $19.95 **Souvenir Coin & Mailing Fee (US address only)**.....

☐ $9.95 **Souvenir Pin** (Must pick up at GAR Expo, Feb. 15-16, 2020).....

☐ $17.95 **Souvenir Pin & Mailing Fee (US address only)**.....

☐ $25 **In Training Dri-Tech Shirt (US address only)**
Style (Please check one): ☐ Men's Cut ☐ Women's Cut.....

☐ $____ **My Gift to GAR Charities**.....

TOTAL PAYMENT..... $

3. Please read and sign.

PLEASE READ AND SIGN.

Sorry, we cannot process without your signature.

Waiver and Release: I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I also know that, although police protection will be provided, there will be traffic on the course route. I assume the risk of running in traffic. I also assume any and all other risks associated with running this event, including but not limited to falls, contact with other participants, the effects of the weather, including high heat and/or humidity, and the condition of the road, all such risks being known and appreciated by me. If I am an operator or occupant of a stroller or assisted wheelchair, I agree that I am fully responsible for my own safety and the safety of the occupant of the stroller or assisted wheelchair. (Safety is defined as doing everything reasonably necessary to avoid or prevent an accident including, but not limited to operation with safe speed and equipment and avoiding risks.) I understand that in the event this race cannot be held as scheduled due to an act of God or circumstances beyond control, or I cannot participate for any other reason, the race is not liable to refund any money donated by me to participate. I further understand that my entry donation is non-transferable.

Knowing these facts, and in consideration of your accepting my entry, I hereby for myself, my heirs, executors, administrators, or anyone else who might claim on my behalf covenant not to sue, and waive, release, and discharge Carole Kai Charities, Inc., the City and County of Honolulu, including their Police Department, the State of Hawaii, the race officials, volunteers, any and all sponsors, and any and all agents, employees, assigns, or anyone acting for or on their behalf from any and all claim of liability for death, personal injury, or property damage of any kind or nature whatsoever arising out of or in the course of my participation in this event. I also hereby consent to permit emergency treatment in the event of injury or illness. Further, I hereby grant full permission to Carole Kai Charities, Inc. and/or agents authorized by them to use any photographs, videotapes, motion pictures, recordings, or any other record of this event for any purpose.

This waiver and release extends to all claims of every kind of nature whatsoever, foreseen or unforeseen, known or unknown.

Signature **(You must sign here for processing)** Date

Signature of parent/guardian if under 18 years. Applications for minors will be accepted only with signature above.

Make non-refundable entry donation check or money order payable to:
GREAT ALOHA RUN and mail to:
Great Aloha Run, P.O. Box 29750, Honolulu HI 96820-2150
Postmark Your Entry by **January 24, 2020**

First Hawaiian Bank
Banking services courtesy of First Hawaiian Bank. $20 assessed for returned check.

(12-19)