

# 50 & DC Half Marathon Group Application Form

## Information

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Home Telephone: \_\_\_\_\_  
E-Mail Address: \_\_\_\_\_  
Age at 1<sup>st</sup> ½ Marathon: \_\_\_\_\_

Number of ½ Marathons you have run.

USA	50 & DC Circuit
Canada	
Countries	
Australia	
Continents	
Total ½ Marathons	

Mail this form and your \$5 membership fee to:

Jerry Schaver  
1124 16th Street Ct.  
Silvis, IL 61282