

# BLACK HILLS VETERAN MARCH

## Individual Registration Form

Print this form to mail. Please type or print legibly.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Gender: Male / Female                      Are you a Veteran? YES / NO (this includes NG Retirees)

E-Mail Address: \_\_\_\_\_

(Needed to send you last minute updates)

Birthdate: \_\_\_\_\_

|   |
|---|
| T-Shirt Size (Circle Only One)                  |
| Small    Medium    Large    X-Large    XX-Large |

Category: (Carefully read the [rules](#) to ensure you are entering the proper category. Mark only one.)

| MARATHON  | MILITARY                | CIVILIAN                |
|---|-------------------------|-------------------------|
| Anyone running more than half of the race is considered a marathoner.<br><br>Also, anyone that finishes the full race in 5hrs or less will be considered a marathoner | Male Military           | Male Civilian           |
|   | Male Military Over 40   | Male Civilian Over 40   |
|   | Female Military         | Female Civilian         |
|   | Female Military Over 40 | Female Civilian Over 40 |

**NOTE:** Be sure to include a signed [waiver/release form](#).

**ONLY ONLINE APPLICATIONS WILL BE ACCEPTED UNLESS CONTACT IS MADE WITH THE EVENT COORDINATOR**