

MONDAY, OCTOBER 11, 2010 @ NOON • BOSTON COMMON

REGISTRATION Also available at tuftshealthplan.com/tufts10k.

For Official Use Only

Please note: Incomplete or unsigned forms will not be accepted. All registration fees are non-refundable.

Last Name, First Name, Middle Initial _____

Street Address _____

City _____ State _____ ZIP _____

Country (if not U.S.A.) _____ U.S. Citizen Y N Wheelchair Y N Tufts Health Plan Member Y N

Number of years participated in this race, including this year _____ 2010 USATF Number (if applicable) _____

DOB ____/____/____ Age as of race day _____ E-mail _____

How did you hear about the race? _____

I would **NOT** like my last name printed on my bib number (must register by September 7th to qualify).

I hereby for myself, my heirs, executors, and administrators, waive and release any and all rights and claims for damages I may have against Tufts Associated Health Plans, Inc., its affiliates and subsidiaries, and their respective officers, directors, and employees, Conventures, Inc. and sponsors, coordinating groups, and any individuals associated with the event, their representatives, successors, and assigns, and will hold them harmless for any and all injuries suffered in connection with this event. I attest that I am physically fit to compete in this event. Further, I hereby grant full permission to any and all the foregoing to use my likeness in all media, including photographs, recordings, my story, or any other record of this event for any legitimate purpose.

Signature _____ Signature of Parent (if under 18) _____

Home Phone _____ Work Phone _____

Method of Payment: \$36: PREREGISTRATION \$48: RACE DAY REGISTRATION
(Applies on Monday, October 11 only.)

Visa MC AMEX Discover Check (Payable to Conventures, Inc.)

Account Number

Expiration: Month

Year

Customer Code (3-4 digit code on your card)

Five-Digit Billing ZIP Code

Name and phone number of cardholder, if different from above _____

Signature of cardholder _____

MAIL TO: Conventures, Inc.
One Design Center Place, Suite 718
Boston, MA 02210

Mail-in Deadline: Monday, October 4, 2010

Online Deadline: Sunday, October 10, 2010, at 9:00 a.m.

Race Day Registration: Registration is available from 7-11 a.m. on the Boston Common
Name on Bib Number Deadline: Must receive application by September 7, 2010