



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

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YMCA of Southwestern Indiana, Inc.
516 Court Street
Evansville, Indiana 47708
812.423.9622
www.ymcaswin.org
www.evansvillehalfmarathon.org

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Our Mission:
The YMCA of Southwestern Indiana, Inc., following the example of Jesus Christ, responds to community needs by serving all people, especially youth, through relationships and activities that promote healthy spirit, mind and body.

The YMCA is a 501 (c)(3) organization and is eligible to receive tax deductible contributions.

EVANSVILLE HALF MARATHON

& 5 Miler OCTOBER 1, 2022



PRESENTED BY



German American Bank

Banking | Insurance | Investments

evansvillehalfmarathon.org

Proceeds benefit the YMCA of Southwestern Indiana



Sponsors



German American Bank

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The Evansville Half Marathon Committee and the YMCA of Southwestern Indiana are proud to present the 19th Annual Evansville Half Marathon presented by German American Bank. This race is the finale to a Series of Races that the YMCA offers.

- 5K/10K, Saturday, August 6
- 15K, Saturday, September 10
- Evansville Half Marathon, Saturday, October 1

All proceeds from our races benefit the YMCA of Southwestern Indiana. These funds help provide scholarships for youth and families to participate in camp, youth sports, swimming lessons and more. Thank you for joining us in our cause!

Military Sponsorship

The Evansville Half Marathon will continue to partner with Ameriquel to recognize our local military by sponsoring their participation in the Evansville Half Marathon. For more information or to register as a military athlete, please visit

www.evansvillehalfmarathon.org.



This offer is an online offer only.

Aid Stations

First aid will be provided by ProRehab and Tri-State Orthopaedics. Aid stations will be available throughout the course and at the finish line.

Expo and Packet Pick-up

The race expo and packet pick up will be held at the Old Downtown YMCA, located at 222 NW 6th St, Evansville, IN 47708. The expo will be open on Friday, September 30 from

10:00am – 7:00pm. A friend or family member may pick up your packet if you are unable to make our packet pick up hours.

The Evansville Half Marathon expo will feature booths from our sponsors and other local companies. If you are interested in having an Expo table, please contact ymcaspecialevents@ymcaswin.org.

There will be no race day packet pick up. Room discounts are available at the Double Tree hotel and others, more information on our website.

Awards

All Half Marathon participants will receive an official long sleeve technical shirt, bib number, and goodie bag. All participants who finish under 4.5 hours will receive a finisher's medal. If you participate in the Series of Races, you will be rewarded a second medal for series participation.

The top 10 men and women finishers will receive special finishing awards. Age group awards will be given to the top 4 in each age category after the top 10 are removed. Awards will be available near the finish line. Please allow for plenty of time for our volunteers to ensure all participants in your age group are in before collecting your award.

Walking awards for warm up races and 5 Miler only.

Pace Groups

The Evansville Half Marathon provides for pace teams for participants wanting to finish with a specific finish time. Our pace groups will offer finishing times ranging from 1 hour 40 minutes to 3 hours and 15 minutes. For more information, please visit our website for further details.

2022 Entry Form

- \$60 Half Marathon Only (until June 30)
- \$70 Half Marathon Only (July 1 – August 31)
- \$80 Half Marathon Only (Sept 1 – Sept 29)
- \$90 Half Marathon Only (Expo Registration Only)

- \$30 5 Miler (until June 30)
- \$35 5 Miler (July 1 – Sept 29)
- \$40 5 Miler (Expo Registration Only)

Online registration will close 2 days prior to event at 11:59 pm

Runner Walker (If you intend to run any portion of the course, register as a runner.)
Wheelchair

- \$95 Short Series 5K/15K/Half (through July 31)
- \$95 Long Series 10K/15K/Half (through July 31)
- \$115 Short Series 5K/15K/Half (August 1 – August 6)
- \$115 Long Series 10K/15K/Half (August 1 – August 6)

Last Name _____ Y Member? Yes No

First Name _____ MI _____

Street Address _____

City _____ State _____ Zip/Postal Code _____

Birthday (month/day/year) _____ Age _____ Sex (M/F) _____

Best Phone (____) _____ Emergency Phone (____) _____

T-Shirt Size Circle a size Unisex (Series & 5 Miler): S M L XL XXL *If registering for the Series, please indicate both your unisex shirt size and cut preference for the Half shirt.
Women's Cut Half: S M L XL
Men's Cut Half: XS S M L XL XXL

Email Address _____
(Please print CLEARLY - This will be our primary source of communication)

For Payment by Credit Card

Account Number _____ Expiration Date _____

Total Amount _____ Signature of Cardholder _____
(Checks can be mailed to YMCA – 516 Court Street Evansville, IN 47708) NO REFUNDS ON RACE REGISTRATIONS

TO THIS AGREEMENT, YOU ARE RELEASING THE YOUNG MEN'S CHRISTIAN ASSOCIATION OF SOUTHWESTERN INDIANA, INC. ("YMCA") FROM ALL LIABILITY AND FOREVER GIVING UP ANY CLAIMS THEREFORE Assumption of Risk I acknowledge and agree that any use of YMCA facilities, services, equipment and premises ("Facilities") and any participation in YMCA programs and activities ("Programs") comes with inherent risks including, but not limited to: (1) personal injury, (2) property damage, (3) disability, (4) death, and (5) sickness or disease. I voluntarily accept and assume full responsibility for these risks as well as any and all other risks of the use of Facilities and participation in Programs. I agree that I have full knowledge of the nature and extent of all such risks and am not relying on all such risks being specifically described in this document. Waiver, Release, Indemnification & Covenant Not to Sue In consideration of the use of Facilities and participation in Programs I, the undersigned, agree that YMCA, its officers, directors, agents, employees, volunteers, insurers and representatives ("Releasees") shall not be liable for any personal injury, property damage, disability, death, sickness or disease – including a defined "communicable" disease and/or within an epidemic/pandemic environment, as determined by federal, state, and local health authorities – by myself, my family members, dependents, or guests, including minors, however occurring including, but not limited to the negligence of Releasees. I understand that I will be solely responsible for any loss or damage, including personal injury, property damage, disability, death, sickness or disease sustained from the use of Facilities and participation in Programs. I further agree, on behalf of myself and any and all legal successors and proxies, to release and HEREBY DO RELEASE, WAIVE AND COVENANT NOT TO SUE Releasees from any causes of action, claims, suits, liabilities or demands of any nature whatsoever including, but not limited to, claims of negligence, which I and any and all legal successors and proxies may have, now or in the future, against Releasees on account of personal injury, property damage, disability, death, sickness, diseases or accident of any kind, arising out of or in any way related to the use of Facilities or participation in Programs, whether that participation is supervised or unsupervised, however the injury or damage occurs, including, but not limited to the negligence of Releasees. In further consideration of the use of Facilities and participation in Programs, I agree to INDEMNIFY, DEFEND AND HOLD HARMLESS Releasees from any and all causes of action, claims, demands, losses, suits, liabilities or costs of any nature whatsoever, including claims of negligence, arising out of or in any way related to the use of Facilities and participation in Programs by myself, my family members, dependents or guests, including any minors. I further grant permission for the use of my name and photographs for publicity and purposes to promote YMCA activities. This release is binding for the undersigned, his/her heirs, legal representative and assigns.

Participant Signature _____ Date _____

Signature of parent of participant under 18 _____ Date _____