

INTERNATIONAL MARATHON HAVANA, CUBA November 15 – 20, 2017 Registration Form



Name:					
Address:					
Phone:F			_Fax:		
Email:					
Passport #:					
Racing Age C	ategory:		<u> </u>		
Event: Full Marathon			Half Marathon		
15K	_ 10K	5K	4-Person Relay-21K		
SIZE: Compe	tition Top	Long Slee	ve Warm Up Jersey		
T-shirt	Hat	Extra cloth	Extra clothing is available at cost.		
Emergency co	ontact: Name:	: _E-mail			
People-to-Peo Occupancy: \$ competitors or	ople Ambassac 300.00 addition \$1,395.00 for CREDIT C	dors: \$2,495.00 onal. \$200.00 de non-competitor	fore Sept. 1; \$2,995.00 after Sept. 1. Support Staff & before Sept. 1; \$2,695.00 after Sept. 1. Single eposit due by Sept. 1; Second Payment \$1,695.00 for s due by Sept. 15. \$900.00 balance will be paid in accepted in Cuba Bring CLEAN bills – no writing or		
Send your dep	posit and a cop	by of your Passp	port to:		
-	•	P.O. Box 329, (fsr@citlink.net	Glen Spey, NY 12737		
How did you h	ear about this	trip: Internet	; E-Mail		
Running Club Other		Other			