



## 2012 Switching Race Request

February 1 – April 20

Date of Request \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip Code \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

Registered for which event? \_\_\_\_\_

Wish to switch to which event? \_\_\_\_\_

New expected finish time for marathon or half \_\_\_\_\_

Switching to a shorter distance	\$ 10
Switching from half to full	\$ 20
Switching from 10K to half	\$ 65
Switching from 5K to half	\$ 70
Switching from 5K to 10K	\$ 15
Total	\$ _____

Method of Payment:

I have enclosed check for fee.

Charge this credit card number for fee. \_\_\_\_\_

Name as appears on card \_\_\_\_\_ Expiration Date \_\_\_\_\_

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Mail completed form to:

Cincinnati Marathon  
644 Linn Street Suite 626  
Cincinnati OH 45203