

York Marathon and Half Marathon 2018

Race Participant Emergency Contact Information

Race Participant Name:
Bib Number:
Medication or Known Allergies to Medication:
Emergency Contact Person:
Contact Number:
Relationship to race participant:



York Marathon 2017

Race Participant Emergency Contact Information

Race Participant Name:	
Bib Number:	
Medication or Known Allergies to Medication:	
Emergency Contact Person:	
Contact Number:	
Relationship to race participant:	