



Visit Mankato invites you to be part of the 16th Annual Mankato Marathon at the Scheels Wellness Expo Friday, October 17, 2025, at the Mayo Clinic Health System Event Center in Mankato. Runners participating in the Full Marathon, Half Marathon, Marathon Relay, 10K, 5K and KidsK attend the Expo to pick up their race packet, get information and check out vendor offerings.

The Scheels Wellness Expo provides the runners and the public the opportunity to browse the Expo to see what's new in the running world and see the latest trends. An estimated 4,100 people attended the Expo in 2024, so don't miss the opportunity to get in front of this crowd. Mankato Marathon offers two opportunities for getting the word out about your business, event and/or special promotion. (See reverse for more information.)

2024 STATS:

- 4,100+ attendees
- 3,386 Runners
- Open to the public

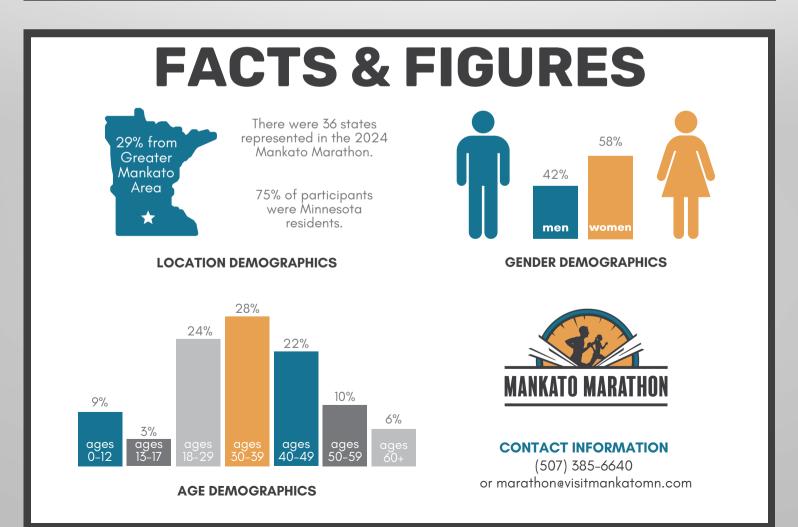
 SET UP:
 9 AM - 12 PM

 EXPO:
 12 PM - 7 PM

 TEAR DOWN:
 7 PM - 9 PM

BOOTH INCLUDES:

- 8' x 24" skirted table
- 2 Chairs
- Back & Side Drape



EXPO& RUNNER GOODIES OPPORTUNITIES

OPTION 1: EXPO VENDOR

As a supplier and partner in the running industry, the Scheels Wellness Expo is the perfect opportunity for your company to gain exposure to a target audience. This is a free event for participants and their families and it is open to the public. Check in and registration for all runners is located in the Expo. Each booth includes a skirted table, two chairs and back and side draping.



All vendors selling products <u>MUST</u> provide a ST19 form. BOOTH SPACE IS NOT SECURED UNTIL COMPLETED FORM WITH PAYMENT IS RECEIVED.

OPTION 2: RUNNER GOODIES

Produce a coupon, sample or other promotional item for the runners. All runners will receive a race bag that they can stuff full of items from our goodie table. Expo vendors have the opportunity to provide runner goodies at their vendor tables.

RUNNER GOODIES	GMG MEMBER	NON-GMG MEMBER
Cost	\$50	\$100

QUANTITY: Up to 3,000 DELIVERY DEADLINE: October 1, 2024 DELIVER TO: Visit Mankato, 3 Civic Center Plaza Ste 100, Mankato, MN 56001

EXPO & RUNNER GOODIE FORM

COMPANY NAME			_	
CONTACT			_	
MAILING ADDRESS				
CITY				
PHONE	EMAIL		_	
BUSINESS BOOTH/RACE PACKET INSERT DESCRIPTION				
			_	
			_	
			_	
SIGNATURE		DATE	_	



EXPO VENDOR BOOTH \$__ RUNNER GOODIE \$

TOTAL PAYMENT DUE \$

PAYMENT METHOD

CHECK: Make payable to Visit Mankato.
CREDIT CARD*: Convenience fee of 3.5% will be applied
when credit card payment is processed.

🗌 VISA 🗌 M	ASTERCARD	AMERICAN EXPRESS	
CARD NUMBER	R		
NAME ON CAR	RD		
EXP.	CVC	BILLING ZIP CODE	

Date

COMPLETED FORMS WITH PAYMENT MUST BE RECEIVED BY OCTOBER 1, 2025 TO PARTICIPATE.

Mail forms and payment to: Visit Mankato, 3 Civic Center Plaza Ste 100, Mankato, MN 56001.

All sales are subject to approval by the Mankato Marathon. All sales are final and no refunds will be made to exhibitors or runner goodies that do not show.

ACCIDENT WAIVER AND RELEASE OF LIABILITY FORM

I (individual or business) hereby assume all the risks of participating in this event. I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and the responsibilities at said event. In consideration of my application and permitting me to participate in the Mankato Marathon Expo, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: Waive, Release, and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter accrue to me or my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSON(S): City of Mankato, Blue Earth County, Visit Mankato, Final Stretch, Anderson Race Management, Mayo Clinic Health System Event Center, their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors, event volunteers; (B) Indemnify and Hold Harmless the entities or person(s)mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of my actions during the Mankato Marathon Expo. I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and/or illness during the event. I understand that at this event I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/ or assigns. This AWRL shall be construed broadly to provide release and waiver to the maximum extent permissible under applicable law: I hereby certify that I have read this document; and, I understand its content.

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