

Whiskey Basin - April 8, 2017

Official Use Only
Race-Day Bib
#

First Name

Last Name

Address
City _____ **State** _____ **Zip** _____

Email Address _____

Phone _____

Male **Female** **Age on Race Day** **Date of Birth**

Entry Fees (Please Circle)

	Fees by Postmark Date	Until 1/6	Until 3/10	Until 4/8	Race Day	Amt Due:
<input type="checkbox"/>	10 Kilometer	\$43.34	\$48.76	\$54.18	\$65.01	\$ _____
<input type="checkbox"/>	31 Kilometer	\$75.84	\$81.26	\$86.68	\$97.52	\$ _____
<input type="checkbox"/>	57 Kilometer	\$108.35	\$113.77	\$119.19	\$130.02	\$ _____
<input type="checkbox"/>	88 Kilometer	\$151.69	\$157.10	\$162.52	\$173.83	\$ _____

Prices include City of Prescott and State of Arizona Amusement Tax.

Race shirt guaranteed on race day if registered by 3/10, otherwise will be sold on race day if available.

Camping Permit (April 7-8, 2017)	Fee	
Camping Permit (1 RV + 1 Tent, or 2 Tents)	\$35	\$ _____

Total Due: \$ _____

Shirt Cut **Male** **Female** **Youth** **Shirt Size** **XSm** **Sm** **Med** **Lg** **XL** **2XL** **No Shirt** **Subtract \$10.83 From Entry Fee**

Please include your entry fee and mail to:
(checks payable to ARAVAIPA RUNNING)

Aravaipa Running
11049 N 23rd Drive #102
Phoenix, AZ 85029

Event Waiver & Release

This waiver covers the Whiskey Basin Trail Runs held April 8, 2017. I understand that running on trails is strenuous exercise and has some danger. I give statement that I am in good health and there is no medical reason that I should not attempt such a feat. I know that running on trails poses many hazards, not limited to falls, bad weather, rockslides, getting lost, wild animal attack and generally dangerous conditions. I am entering this event with full knowledge that I could easily be hurt or face life threatening injuries. I fully assume all risks of injury, illness or death, and release covenant not to sue, and discharge the Prescott National Forest, City of Prescott, Yavapai County, United States Government, Aravaipa Running LLC, USA Track & Field, the race director, volunteers, all sponsors, and any individuals or groups associated with this event, all actions, claims or demands for damages arising out of my participation in this event. The forgoing release is binding upon me personally, as well upon my heirs, executors, and administrators, and all members of my family, or anyone else who may make claim on my behalf. Entry fees are non-refundable and non-transferrable. I further grant my irrevocable permission to Aravaipa Running LLC, and its authorized agents, to use my name and any photographs, videos, motion pictures, recordings, or any other record of my participation in this event. No REFUNDS or TRANSFERS once entry is accepted.

By signing this form I agree to act as a volunteer and/or participant and to be bound by the terms of the waiver of liability below. In consideration of my desire to serve as a volunteer and/or participant for the 2017 Black Canyon Ultra Event sponsored by Aravaipa Running; I hereby assume all responsibility for any and all dangers or risk of property damage or bodily injury that I may sustain while volunteering and/or participating. Further, I hereby release, indemnify, hold harmless, waive and discharge Yavapai County, their Boards, Council, officials, employees, volunteers and agents from any and all claims asserted by anyone arising from out of any injury or accident I suffer, actions, losses, liabilities, costs, damages, or expenses, including but not limited to court costs and reasonable attorney's fees arising out of bodily injury or death, or tangible or intangible property damage, which I or my spouse, children, heirs, executors, successors or assigns ever may have in connection with such volunteer efforts, or my participation therein, and hereby waive all such claims, demands and causes of action. Further, I expressly agree that this release and waiver is intended to be as broad and inclusive as permitted by the State of Arizona, and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect. I have read, reviewed, understand, and agree to this waiver of liability.

Signature _____

Signature of Parent/Guardian if under 18 Years _____

Date _____