

Across The Years Registration - (Page 2)

Entry Fees: Please check which race you would like to enter and which date you would like to start. Entry fees are listed in the table below along with price increase deadlines. (Price includes tax)

Across The Years: FIXED DISTANCE EVENTS

<input type="checkbox"/> 100 Mile - ACROSS THE YEARS Start 9 am December 30th	\$282.36	\$304.08	\$336.66	\$358.38
<input type="checkbox"/> ATY Marathon Choose Your Start Date: (circle) Dec. 28 Dec. 29 Dec. 30 Dec. 31. Jan. 1 Jan. 2 Jan. 3 Jan. 4 Jan. 5 Jan. 6	\$81.45	\$103.17	\$124.89	\$135.75

\$ _____

Across The Years: GOODY BAG

<input type="checkbox"/>	ATY Goody Bag (Sport Bag, Jacket & Beanie) Jacket Cut: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Youth Jacket Size: XSm Sm Med Lg XL 2XL <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	\$ 141.18	
<input type="checkbox"/>	UltrAspire Reusable Cup (hot & cold liquids)	\$6.38	\$

\$ _____

Across The Years: CAMPING & ADD-ONS

	Camping & Tent Rental Options		Fee
<input type="checkbox"/>	Large Tent (12'x8') Rental		\$65.16
<input type="checkbox"/>	Large Tent (12'x8') Rental with 1 Cot		\$86.88
<input type="checkbox"/>	Large Tent (12'x8') Rental with 2 Cots		\$108.60
	Sleeping Bag & Table Rental Options	Quantity	Fee (Each)
<input type="checkbox"/>	Sleeping Bag Rental		\$32.58
<input type="checkbox"/>	Personal 6 Foot Table Rental		\$27.15

\$ _____

\$ _____

*Please make check or money order payable to: Aravaipa Running

Mail to:

Total Due: \$ _____

ARAVAIPA RUNNING
2401 S 24TH STREET
Phoenix, AZ 85034

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Runner Questionnaire: Optional

Mileage Goal _____ **Trying for a record?** _____

Dietary restrictions (vegetarian, vegan, etc.) _____

Runner Biography (for website - optional)

Personal website/blog _____

Are you running ATY to support a charity? _____

Additional Comments / Medical info, special needs or allergies we should know about?

Event Waiver & Release

All applications MUST be signed to enter this event. No entry accepted without fee.

I wish to enter and participate in the Across the Years Ultra running event. I accept the rules, conditions and regulations of this event and will comply with them. I have sufficiently trained to participate in this event and am in good health. I am capable of making rational decisions and judgments for the safety and welfare of myself. The essence of this release is that the Across the Years ultra running event represents extreme and unknown risks for which I freely and voluntarily agree to be solely responsible.

In accepting this entry, I, my heirs, executors, and administrators, hereby waive, release, and discharge the Across the Years ultra running event, Aravaipa Running LLC, USA Track & Field, the City of Glendale, the City of Phoenix, Camelback Ranch, its staff, any official sponsor entity, officers, directors, members, volunteers, agents and employees of each, all medical and other personnel assisting with the ultra running event, their representatives, successors, and assigns, from any and all rights, claims, or liability for damage for any and all injuries to me or my property or damage caused by me or anyone else (including Acts of God), arising out of or in connection with my participation in this event, including death. I further agree that I will defend, indemnify and hold harmless the Across the Years run and any official sponsors and the directors, officers, members, agents, and medical staff of each, against all claims, demands and causes of action, including court costs and attorneys' fees directly or indirectly arising from any action or other proceeding brought by or prosecuted for my benefit contrary to the Agreement. This release extends to all claims of every kind and nature whatsoever, whether known or unknown.

I hereby give consent to treatment by our on site medical provider during the course of this event. In the event that I am unable to give verbal consent, I hereby allow the on site medical team to begin treatment until such time it is deemed no longer necessary. I understand that the on site medical care is provided to me at no cost. I also hereby give consent to the on site medical provider, to have me transported via ambulance to a higher level of care if I am unable to give consent. I also understand that in the event of ambulance transport, I bare the cost of this medical treatment and will be responsible for all costs associated. This consent to treatment is for the duration of this event, and this event only.

In consideration of this entry, I, the undersigned intending to be legally bound, for myself and anyone acting on my behalf, release any and all claims for damages I may have against the Across the Years run, its sponsors and their representatives, successors and assigns for any and all injuries and death suffered by me in said event. I attest and verify that I know running an ultra race can be a potentially hazardous activity. However, I have sufficiently trained for the competition of this event and I know that I am running at my own risk. I have read this waiver of liability and I agree with and understand its contents. I will additionally permit the free use of my name, photographs, video, and pictures in broadcasts, telecasts, newspapers, etc.

If the entrant is under 18 years of age, I understand that a parent or guardian must be present for the duration of the event to supervise, assist, and otherwise ensure the health and welfare of the entrant.

Signature

Date

Signature of Parent/Guardian if under 18 Years old