



# Chase the Moon

## June 27, 2026

Official Use Only  
Race-Day Bib  
#

CASH  CREDIT

**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 1/12 | Until 5/11 | Until 7/7 | Race Week |
|--------------------------|-----------------------|------------|------------|-----------|-----------|
| <input type="checkbox"/> | 12 Hour Solo          | \$145      | \$155      | \$165     | \$175     |
| <input type="checkbox"/> | 3 Person Relay        | \$275      | \$305      | \$335     | \$365     |
| <input type="checkbox"/> | 5 Person Relay        | \$405      | \$455      | \$505     | \$555     |
| <input type="checkbox"/> | 50 KM                 | \$145      | \$155      | \$165     | \$175     |
| <input type="checkbox"/> | 6 Hour Solo           | \$120      | \$130      | \$140     | \$150     |
| <input type="checkbox"/> | 3 Hour Solo           | \$95       | \$105      | \$115     | \$125     |

**Shirt Cut:** **Male**  **Female**  **Youth**       **XSm**  **Sm**  **Med**  **Lg**  **XL**  **2XL**

Race goody guaranteed on race day if registered by 6/5 otherwise will be given on race day if available.

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

**Aravaipa Running**  
2401 S. 24th Street  
Phoenix, AZ 85034

### Event Waiver & Release

I wish to enter and participate in the Chase the Moon Ultrarunning 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 Chase the Moon ultrarunning 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 Chase the Moon, Aravaipa Running LLC, USA

Track & Field, the City of Highlands Ranch, Mountain Vista High School, Highlands Ranch and its staff, any official sponsor entity, officers, directors, members, volunteers, agents and employees of each, all medical and other personnel assisting with the ultrarunning 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 Fat Ox 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.

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 Chase the Moon runs, 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

\_\_\_\_\_  
Signature of Parent/Guardian if under 18 Years

\_\_\_\_\_  
Date