Waugoshance Trail Run

July 11, 2026

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 MM DD YYYY

Entry Fees (Please Circle)

	Fees by Postmark Date	Until 12/15	Until 5/15	Until 7/6	Race Day	Amt Due:
☐	50 KM	$115	$125	$135	$145	$
☐	Marathon	$105	$115	$125	$135	$
☐	1/2 Marathon	$85	$95	$105	$115	$
					Total Due:	$

***Race shirt guaranteed on race day if registered by 6/20.**

Shirt Cut — Male ☐ Female ☐ Youth ☐

Shirt Size — XSm ☐ Sm ☐ Med ☐ Lg ☐ XL ☐ 2XL ☐

☐ **No Shirt** — Subtract $8.67 From Entry Fee

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

This waiver covers the Waugoshance Trail Runs held July 11, 2026.. 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 City of Mackinaw, Emmet County,Wilderness State Park, Aravaipa Running LLC, Great Lakes Endurance, 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 Ara-vaipa 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.

_____
Signature

_____
Signature of Parent/Guardian if under 18 Years

_____
Date