2017 Kendall Mountain Run Entry Form

First Name _____

Last Name _____

Address _____

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

Email Address _____

Phone _____

☐ **Male** ☐ **Female** **Age on Race Day** ☐☐ **Date of Birth** M M D D Y Y Y Y

Entry Fees: (Please Circle)

	Postmark Date	Until March 31	Until June 23	Until July 18	After July 18
☐	**Kendall Mountain Run (12 Miles)**	**$45**	**$50**	**$55**	**$60**
☐	**Kendall 11 Kilometer Run**	**$35**	**$40**	**$45**	**$50**

Shirts guaranteed on race day if registered by June 23. After this, shirts are available pending availability.

Shirt Cut

Male ☐ **Female** ☐ **Youth** ☐

Shirt Size

XSm ☐ **Sm** ☐ **Med** ☐ **Lg** ☐ **XL** ☐ **2XL** ☐

No Shirt

☐ **Subtract $10 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**

Why Arizona?
Read about Aravaipa Running (Race Directors) at
www.silvertonalpinerunning.com/contact

Event Waiver & Release

This waiver covers the Kendall Mountain Run held July 22, 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 Aravaipa Running LLC, USA Track & Field, the International Skyrunning Federation, US Skyrunner Series, the Town of Silverton, San Juan County, 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.

US Sky Running Waiver: I know that running a trail race is potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but no limited to: altitude sickness, falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the trail, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the US Skyrunner Series, all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

_____
Signature

_____
Signature of Parent/Guardian if under 18 Years

_____
Date