2018 Twisted Crawdad Trails Race Weekend

Twisted Crawdad Mountain Bike Race: Sat., September 15
Twisted Crawdad Trails Run: Sun., September 16

| Racers | Name: | Male: Female: |
|--|--|--|
| Town_ | State: | Phone #: |
| Email a | address: | (If you want future race information) |
| Emerge | ency Contact: Name | Phone |
| Age on | race day:S | Sm, Med, Lg, XL, XXL |
| Where | did you hear about the race? | |
| Pick | Race Description | Rate |
| | Half Marathon Trails Run | \$45.00 |
| | 10k Trails Run | \$35.00 |
| | 5k Run/Walk Trails Run | \$25.00 |
| | 15 Mile Mountain Bike race | \$45 |
| | 20-25 Mile Mountain Bike Race | \$60 |
| (unders for myse for any event, responsor National the raced determined) | that I am physically fit and medically able to standing that trail running has an increased riself, and my heirs, executors, or administrators accident, injury, or loss arising out of my part egardless of whether prior to, during, or after (s), official(s) or volunteer(s), specifically included a lose of the event of adverse weather conditions on the event of adverse weather conditions on the solely at the discretion the Chadron Comble, non-deferrable, and non-transferable, event photographs from this event to be used to | coarticipate in the race. I enter the race at my own risk sk of injury). I hereby forever waive, discharge and release, so, any and all claim(s) for liability or damages of any type icipation in this event, or while traveling to or from the rathe event, against all person(s), organization(s), uding Chadron Community Recreation and the Nebraska ethe right to delay, postpone, cancel, or not officially time or other events outside the organizers control, to be amunity Recreation committee. Entry fees are nonen in the case of event cancellation. I hereby agree to publicize future trail races for Chadron Community |
| Signatu | ure of Participant | DATE |
| Signatu | re or Parent/Guardian (if participant is under | 18 years of age) DATE |

All runners under 18 years of age need to have a parent or guardian's signature.

Mail forms to: Chadron Community Recreation P.O. Box 4 Chadron Ne. 69337

Make Check payable to: Chadron Community Recreation

To be guaranteed a shirt must have entry forms turned in before September 5th

For more information email Donna Ritzen: dritzen@csc.edu