



'Dam' Good 14 Mile Trail Run
REGISTRATION AND WAIVER

PLEASE PRINT LEGIBLY.

Name (Last, First):		
Mailing Address (Street, City, State, Zip):		
Email Address:		
Phone: ()		
Demographics:	Age on race date:	Gender: Male/Female
Shirt Size (circle one):	Men's M/L/XL	Women's S/M/L

Waiver: I know that participation in a running event of this type is potentially hazardous. I should not enter and run unless I am medically able and have trained properly. I fully understand that I or the person that I am responsible for, will be subjected to harsh environmental conditions, including but not limited to, unseasonably extreme temperatures, uneven terrain, rock, roots, trees and branches, stream crossings, wild animals and limited access for immediate medical assistance. I understand that there is the risk of sustaining bodily injury and even death. I, myself, or the person that I am responsible for, release the race directors, the State of New York, Finger Lakes Trail Conference, US Army Corps of Engineers, event sponsors, and any other persons involved in this event from any liability that may be incurred by myself, or the person I am responsible for, as a result of my/his/her participation in this event. I understand that I or the person I am responsible for will be responsible for any cost of emergency service that is required during or as a result of this event. I also understand that all entry fees are non-refundable, even if the race is cancelled by an act of nature or human.

Signature: _____ Date: _____

Responsible Party Signature (if under 18): _____ Date: _____

MAIL REGISTRATION AND SIGNED WAIVER TO: 'Dam' Good Trail Race 16 Monroe Street Honeoye Falls, NY 14472	MAKE CHECKS PAYABLE TO: Trail Less Travelled If postmarked by August 4th....\$30 After August 4th—race day....\$40
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