**Race Title**

**Race date:**

**Race location**:

**Race contact:**

**Race description:**

**Distance/s (registrant please circle if multiple choice):**

**Cost:** *Pre-registration:*

*Day of race:*

*Make checks payable to:*check # \_\_\_\_\_\_\_\_\_\_

**JTRR Member:**  **YES**  **NO (If yes, you need only include your names and sign this form.)**

**Last Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **First Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Date of Birth**:\_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (For NAOC points we use age as of July 1 of each year)

**Phone:** (\_\_\_\_\_) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Email address: \_\_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mailing Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact Name/Phone:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (\_\_\_\_\_)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**WAIVER:** I know that running a road or trail race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained to complete the event. I agree to abide by any decision of a race official relative to my ability to safely complete this run within the designated time limit. I assume all risks associated with running in this race, including, but not limited to falls, contact with other participants, runners, bikers, and animals, the effects of weather, including heat or cold and precipitation, traffic, and the conditions of the trails and roads, 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 for whom I am entitled to act, waive, release, and will hold harmless the race organizer, all sponsors, all property owners, and all the agents, employees, officers, directors and volunteers working for those entities from all claims and liabilities of any kind arising out of or related to my participation in this race. I understand that headphones, roller skates and dogs are not allowed in this race/run. Some races may allow baby joggers or strollers, which may require a separate waiver.

**Signature of entrant:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Date:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Signature of parent or guardian if under 18:**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_