

MTN RNR TRAIL SERIES

SEARCH AND RESCUE INFORMATION. PLEASE COMPLETE ALL INDICATED INFORMATION.

Run:

Name:

e-mail address:

MAILING ADDRESS:

AGE: SEX : HEIGHT: WEIGHT: HAIR COLOR: EYE COLOR:

SHIRT: COLOR _____ MARKINGS _____

SHORTS: COLOR: _____ SHOE MAKE & COLOR: _____

WARM UP: TOP COLOR _____ MAKE _____

BOTTOM COLOR _____ MAKE _____

PACK: COLOR _____ MAKE _____

HAT: COLOR: _____

WATER VOLUME CARRIED: _____

OTHER SUPPLIES: (Matches, candy, gloves, etc.): _____

VEHICLE Year _____ Make _____ Color _____ State _____ Plate # _____

WAIVER

LONG FORM: In consideration of participating in this run, I hereby, for myself, my heirs, executors, and administrators waive and release any and all rights or claims for damage which I may have against the organizers of the MTN RNR Series, or the branches of the government administering the lands, of the land owners upon whose property these runs area held. I verify that I have read the warnings about the potential dangers inherent in these runs and fully accept them. I attest and verify that I am physically fit and have sufficiently trained to be able to complete this run.

SHORT FORM: I fully understand that engaging in this run is dangerous and could result in serious injury or death. I'm going to do it anyway.

SIGNATURE _____

If you have any comments or suggestions, write them on this form or let us know.

(Runners do not complete finish place or finish time.)

FINISH PLACE: _____

FINISH TIME: _____