

FROZEN SASQUATCH TRAIL 50K/25K SAT., January 6, 2018 8:00 am

Name _____

Date of Birth _____ Gender _____

How many times have you ran this race? _____

Address _____

City _____ State _____

Zip _____ Phone _____

E-mail _____

8 1/2 Hour Time Limit – Limit 200 – 8:00am start

Shirt Size: S M L XL MENS or WOMENS

Shoe Size _____

Application Fee: 50k: \$50 if postmarked by 11/01/17 and \$60 thereafter _____

25k: \$40 if postmarked by 11/01/17 and \$50 thereafter _____

payable to WVMTR Refund minus \$10 will be granted up to 12/07/17

Registration is CLOSED 12/15/2017

In consideration of your acceptance of my application, I, for myself, my heirs, my executors, and administrators, waive any and all rights and claims for damages I may have against the WVMTR, Race Directors, and their agents and sponsors for any and all injuries suffered by me during the Frozen Sasquatch Trail Run. I acknowledge reading and understanding this clause, and attest and verify that I am aware of the hazards and am physically fit and have trained sufficiently for this event. Race management reserves the right to stop any participant who in their opinion is not fit to continue.

Signature

_____ Date _____

Mail To: Mike Dolin

FS TRAIL RACE

4620 Country Club Blvd., South Charleston, WV 25309