Pinnacle Ultra Challenge entry form 2014

Name	Address				
City	State	Zip			
Male Female email	l				
Event: (Check one) 50K ultra	13.1 Mile	Ultra	Relay		
Start Time Ultra 7:00 AM	_9:00 AM	(3pm cut off	for all racers)		
**Age group (solo only): 12-19	20-29	30-39	_40-49	50+	
Team Name (if applicable)					
Fees: (Circle One) By October 2, 2014 SOLO 50K- \$60 Solo 13.1- \$40 50K Relay - \$90					
CHECK PAYABLE TO: NEWPORT ROTARY CLUB					

MAIL TO: PO BOX 333 Newport, NH 03773

Agreement and Release of liability

In consideration of the acceptance of my entry in the Pinnacle Challenge: I understand that running is a potentially hazardous activity which could cause injury or death. I should not enter and participate unless I am medically able and properly trained and by my signature, I certify that I am medically able to perform this event, am in good health, and am properly trained. I agree to abide by any decision by a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with participating in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, 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 entitled to act on my behalf, waive and release the Newport Rotary Club, the city of Newport, NH, the Newport Recreation Center, Team Pinnacle, and all sponsors, their representatives and successors from all claims and liabilities of any kind including any and all damage caused by negligence of any of them arising out of my participation in the event and its related activities together with any cost including any attorney's fees that may be incurred as a result of any such claim whether valid or not and releases each of them against any such claim that I or my guest or those listed above may have. I understand that there are no refunds regardless of the circumstances and that I must be present to receive any raffle prizes or awards that I may win. I grant permission to all of the foregoing to use any photographs, motion pictures, recordings, or any other record of this event for any legitimate purpose.

Signature	Date
Teammate 2	_Date
Teammate 3	_ Date