



**Pacifica Trail Run  
Entry Form for Saturday, July 8, 2017**

**\*\*\* PLEASE PRINT CLEARLY\*\*\***

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

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender: F\_\_ M\_\_ Shirt Size\*: XS S M L XL 2XL 3XL

Emergency Contact & Phone: \_\_\_\_\_

	<b>Event Fees</b>			
	<u>10K</u>	<u>17K</u>	<u>25K</u>	<u>50K</u>
Before 4/1/17	\$50	\$55	\$60	\$75
Thru 5/31/17	\$60	\$65	\$70	\$85
After 5/31/17	\$70	\$75	\$80	\$95

<b>Shirt*</b>		
Tech Shirt	\$0	
Cotton Shirt	\$0	
No Shirt	deduct \$8	

\*in order to guarantee the shirt size of choice, we must receive your mail-in registration **10 days** before the event  
\*cannot guarantee shirt day of registration

Event Fee: \_\_\_\_\_  
 Shirt: \_\_\_\_\_  
**TOTAL:** \_\_\_\_\_

Please return form with payment to:  
 Pacific Coast Trail Runs  
 320 Penn Way, Los Gatos, CA 95032

**Waiver\*\***

I know that trail running is a potentially dangerous activity. I assume all risks associated with participating in this trail run, including but not limited to, medical, following course markings and directions, falls, contact with other runners, the effects of the weather, the conditions of the roads and trails, parking, crossing roads and traffic on the course, all such risks being known to and appreciated by me. Having read this waiver and knowing these facts, and in consideration of acceptance of my application for Pacific Coast Trail Runs (PCTR) activities, I, for myself and anyone entitled to and on my behalf, waive and release PCTR from all claims or liabilities of any kind arising out of my participation in this run even though that liability may arise out of negligence. I grant full permission to PCTR to use photographs or any other record of this event, including written comments or articles by me, for any legitimate purpose. I understand that entry fees may be non-refundable and non-transferable to future PCTR events according to the Refund Policy.

\*\*As part of this waiver, I acknowledge by signing that I have read and understand all of the above.

Signature \_\_\_\_\_ Date \_\_\_\_\_