

RACE APPLICATION

North Bend State Park
31st ANNUAL RIDGE RUNNER RACES
Saturday – June 6, 2009

Name _____

Address _____

City _____ State _____ Zip _____

Land line contact: _____ Cell: _____

eMail: _____

Male or Female (please check)

Age: _____

Shirt Size: S M L XL XXL (circle one)

Check race you are entering: 10-mile Marathon – 26.2 mile

Ridge Runner Race Entry Fees

\$35 for either race by May 30, 2009

\$40 for either race after May 30, 2009

Total Amount Enclosed: \$ _____

Check made payable to: North Bend State Park

Send completed applications and payment to:

North Bend State Park

Attn: Gayle McGuffey

Rt. 1, Box 221 • Cairo, WV 26337

Phone • 304-643-2931

RACE WAIVER

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. I assume all risks associated with running in this event including, but not limited to: falls, contact with other participants, the effects of weather, including high heat or humidity, traffic and the condition of the road, and 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 acting on my behalf, waive and release West Virginia State Parks and Recreation, North Bend State Park and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver.

Signature: _____

Date: _____

Parent/Guardian signature if under 18: _____

Date: _____

Print name: _____

Emergency Contact: Name: _____

Phone: _____

Print name: _____

eMail: _____