

# Trail of the Coeur d'Alenes 100K Relay & Solo 100K Relay Run Registration Form

**RELEASE, WAIVER, ASSUMPTION OF RISK & INDEMNIFICATION.** 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 the Trail of the Coeur d'Alenes 100k Run, June 30, 2007, 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. In consideration for my participation, I, for myself, and anyone entitled to act on my behalf, waive, release and will indemnify and hold harmless the Cataldo Mission State Park, Idaho State Parks and Recreation, Coeur d'Alene Tribe, the Trail of the Coeur d'Alenes, Shoshone, Kootenai, and Benewah counties, all other sponsors of the race, their agents, and other persons assisting with the race, and their successors from all claims of liabilities of any kind arising out of my participation of the race even though that liability may arise out of negligence of carelessness on the part of such persons. I grant unrestricted permission for the use of any photographs, motion pictures, recordings or other record of my participation in the race. Parents or guardians must sign for RELAY TEAM members under 18 years of age.

**RELAY TEAM INFORMATION:** (Please type or print legibly; captains make a copy for your information; return entire page).

Relay team name \_\_\_\_\_ Team captain \_\_\_\_\_

Estimated Team Finish Time (important to ensure correct start time) \_\_\_\_\_

Team Category (<10 Member Teams): open (any gender/age mix) \_\_\_ all men \_\_\_ all women \_\_\_ youth \_\_\_

Name (print last, first)	Signature (I have read and understand the release statement above)	Address (street, city, zip)	Age on 6/30/07	Phone (inc. area code)	M/F	T-shirt S/M/L/XL
1. Team Captain						
2.						
3.						
4.						
5.						
6.						
7.						
8.						
9.						
10.						

Checks made out to TOTCd'AS Run. Team captains submit one check for the

team to: TOTCd'A'S Run  
C/o Tom Gillies  
75 Luoma  
Kingston, ID 83839

Team relay (\$12 x \_\_\_ no. of team members) \_\_\_\_\_ Late fee +\$15 \_\_\_\_\_ (after June 22, 2007)

Total enclosed \_\_\_\_\_

Visit <http://www.SV2Day.com> for up to the minute relay information!