

Saguaro National Park Run Labor Day Run

Mail-in entries must be postmarked by August 20, 2018.

Print this form, fill it out, and mail it with a check payable to:

*Southern Arizona Roadrunners, Saguaro
PO Box 64215; Tucson, AZ; 85728-4215*

Last Name _____

First Name _____

Street _____

City _____ State _____ Zip _____

E-mail _____ SAR Member: Y N

Telephone _____ Sex M F Age on 9/3/18 _____

TOTAL EVENT CAP IS 750 OVERALL PARTICIPANTS

8 Mile Race

SAR member until June 30, 2018 \$40 _____

All until June 30th, 2018 \$45 _____

All after July 1 \$50 _____

5k Run/Walk * (Children in 5k under 12 are free with no t-shirt)

SAR member until June 30, 2018 \$30 _____

All until June 30th, 2018 \$35 _____

All after July 1 \$40 _____

TOTAL FEES PAID \$ _____

* Fees are \$5 less if you have a Saguaro National Park Pass. Indicate your park service number here: _____

Please note that the Park Service asks that all participants pay the standard \$5 entry fee to the park. This amount will go directly to the National Parks Service. If you buy an annual pass to the national parks this fee will be waived if you provide your permit number on your entry form. For information on an annual park pass go to www.nps.gov/sagu/

Please remember that all registrations are final, with no refunds or transfers to other races. The race will take place rain or shine.

Please read and sign the following waiver: In consideration of the acceptance of this entry, I hereby, for myself and my heirs, executors and administrators, waive any and all rights, claims and damages I may have against the sponsors, coordination groups, including the Southern Arizona Roadrunners, Run Tucson, Pima County, the National Parks Service and any individuals associated with said event. Also, none of the above are responsible for the loss of personal items nor any other form of aggravation in connection with said event. I recognize that this course is difficult in nature and that the event takes place in high heat, with all attendant risks. I have been warned I must be in good health to participate in the event. In filling out this form, I give permission for the free use of my name and picture in any broadcast, telecast, digital or print media account of this event. In filling out this form, I acknowledge I have read and fully understand my own liability and do accept the restrictions.

Entrant's Signature _____ Date _____
(Parent or Guardian's Signature if under 18)