MAIL FORM WITH CHECK OR MONEY ORDER TO:

Urban Coyote Racing P.O. Box 1903, Mill Valley, CA 94942

Date: _____

Event: PACIFICA SUMMIT RUN	Event Date: SA	TURDAY, SEPTEIVIB	EK 11, 2021
Name:	Age:	Date of Birth:	
Email Address:		Phone #:	
Street Address:		City:	
State: Zip Code	e:	Gender (circle):	M / F
Emergency Contact Name:	Emerg Phone #:		
ENTRY FEES Basic (Until 7/31/21) 10K: \$40	Half: \$50	30K: \$60	Youth: \$25
Regular (Until 9/04/21) 10K: \$50	Half: \$60	30K: \$70	Youth: \$35
Race Day (Until 9/11/21) 10K: \$55	Half: \$65	30K: \$75	Youth: \$40
SHIRT SIZE (GUARANTEE FOR SHIRT EN X-Small Small Medium			iirt (-\$5.00)
TOTAL AMOUNT ENCLOSED:			
WAIVER I know that running is a potentially dangerous action not limited to, medical, following course markings the conditions of the roads and trails, and traffic or read this waiver and knowing these facts, and in conditions, I, for myself and anyone entitled to and diabilities of any kind arising out of my participation permission to Urban Coyote Racing to use photograrticles by me, for any legitimate purpose. I undersurban Coyote Racing events. I agree	and directions, falls, contain the course, all such risks onsideration of acceptance on my behalf, waive and read in this run even though taphs or any other record of	act with other runners, the being known to and app e of my application for Ur elease Urban Coyote Rac hat liability may arise out of this event, including w	ne effects of the weather, reciated by me. Having rban Coyote Racing ing from all claims or t of negligence. I grant ful ritten comments or

Signature: