



REDWOOD WILD RIVER RUN

5K and 15K run/walk

11:00 a.m. Saturday, March 15, 2025

The course is a gently rolling out and back on hard-packed gravel road through scenic old growth redwood forest. An aid station is available on the 15k course. Portable toilets at start; dressing areas limited to space behind available trees.

Early Registration (through March 8): \$17 (excludes shirts)

Registration (March 9-15): \$25 (excludes shirts)

Hooded sweatshirts: +\$35

Early Family Registration (within one household): \$50 (excludes shirts)

Family Registration Rate (within one household): \$55 (excludes shirts)

Location: Ten miles northeast of Crescent City, CA

Directions: From inland, take Hwy 199 west to South Fork Rd. and turn left.

From the coast, take Hwy 199 east to South Ford Rd. and turn right.

Follow "RACE" signs. Please carpool.

The race will begin and end at the covered bridge on Douglas Park Road.

Divisions: 15K: 19 & under, 20-29, 30-39, 40-49, 50-59, 60-69, 70+

5K: 9 & under, 10-14, 15-19, 20-29, 30-39, 40-49, 50-59, 60+

Race packets may be picked up the morning of the race at the registration table starting at 08:30 until just prior to race start time.

Name _____

Mailing address _____

City/State/Zip _____

Phone _____

Email _____

Age _____ Gender _____ Total paid _____

Circle adult shirt size: S M L XL (Shirts not included in registration. Purchase for +\$35.)

Circle your event: 5K Run 5K Walk 15K Run 15K Walk (Must start at 9:00 a.m.)

(See rates above)

PARTICIPATION AGREEMENT: I, for myself, my heirs, executors, and assigns, forever waive, release and discharge any and all rights, demands, claims for damages and causes of suit or action, known or unknown, that I any have against any and all participating sponsors (including Redwood National and State Parks), agencies of such parties, for and all injuries, including negligence. I have full knowledge of the risks and I attest that I am physically fit and sufficiently trained to participate in this event and assume all responsibility and payment for any and all medical emergencies that may rise. I certify that I have read the entry information and that all information that I have provided is true and complete, and certify my compliance by my signature.

Signature of participant (or of Parent/Guardian if participant is under 18 years old)

Date

Send to RWRR, 161 Christensen Way, Crescent City, CA 95531

For information, contact Michelle Martinich: 707-954-4987 martinichm@gmail.com

A USATF Sanctioned Event