

Trails 4 Tails

40 mile ultra and relay

Sept. 24, 2022, 7:00am Ultra start, 8:00am Relay start
Codorus State Park
Hanover PA

- 40 mile run on wooded trails, shore line, and some roads at Codorus State Park. This will be 7 laps of 5.72 miles at the swimming pool area and Mary Ann Furnace trail. Directions to the park can be found at <http://www.dcnr.state.pa.us/stateparks/findapark/codorus/index.htm>
- Start/finish/aid will be at Pavilion 1. Parking, restrooms, and water also available.
- Course will be marked with surveyor's ribbons.
- Course closes at 6:00pm. Park will lock gate at sunset.
- Ultra aid station and optional relay exchange will be on the course around mile 3.7 .
- \$50 pre-registration fee for Ultra by Sept 2. \$60 after the 2nd and on race day. \$40 pre-registration per person for Relay. \$50 after Sept. 2. Additional donations will be accepted for Local Animal Shelter. Make checks to South Penn Road Runners. Send application and check to Kev Hawn, 2008 Yingling Drive, Spring Grove, PA. 17362.
- Custom shirts for pre-registration by Sept 2.
- Relay can be up to 10 participants with legs of 5.7, 3.7, 2 miles or combination of distances. See separate relay registration sheet at trails4tails.com to sign up team.
- Questions? Contact Kev Hawn at hawnsrun@comcast.net or call 717-451-2368 before 9:00pm.
- Additional info and applications available at trails4tails.com



Thanks to:
Commonwealth of PA, Depart. of Conservation and Natural Resources, Bureau of State Parks.

See us on Facebook

Name _____

Address _____

Age _____

Email _____ Sex, circle one M / F

Phone _____ Shirt size; circle one S M L XL

RELEASE

that running a trail race is a potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, physical contact with other participants, volunteers, race personnel, contract service providers, employees, and spectators including the potential the contraction of a communicable disease resulting from contact with other participants, volunteers, race personnel, contract service providers, employees, and spectators. I assume all risks including: the effects of the weather; high heat and/or humidity; freezing cold temperatures; traffic and the conditions of the road including surrounding terrain. I further agree to abide by the Center for Disease Control's (CDC) recommendations for the prevention of the spread of the 2019 Novel Coronavirus Disease (COVID-19) and other communicable diseases, and I attest to having read the CDC's guidance at: <https://www.cdc.gov/coronavirus/2019-ncov/prepare/prevention.html>. I assume all such risks being known, appreciated, and accepted by me.

I will abide by all race rules. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Trails 4 Tails run, South Penn Road Runners, Codorus State Park, and the Road Runners Club of America, all event 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. In addition, I acknowledge the contagious nature of COVID-19 and other communicable diseases and voluntarily assume the risk that I may be exposed to or infected by COVID-19 and/or other communicable diseases by participating in this event. I acknowledge that such exposure or infection may result in personal injury, illness, permanent disability, and/or death. I understand that the risk of becoming exposed to or infected by COVID-19 in connection with my participation in this event and personally assume this risk.

I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purposes. I understand that this event does not provide for refunds in the event of a cancellation, and by signing this waiver, I consent that I am not entitled to a refund if the event is cancelled before or during the event.

SIGNATURE

DATE

PARENT (IF UNDER 18)

Trails 4 Tails Relay team registration

Team Name _____
Captain Name _____
Address _____
Age _____
Email _____ Sex, circle one M / F
Phone _____ Shirt size, circle one XS S M L XL

SIGNATURE _____ DATE _____ PARENT (IF UNDER 18) _____

RELEASE

All team members must sign release. Print additional copies as needed.

In consideration of the acceptance of this entry to the Trails 4 Tails 40 mile run and relay I waive all claims for myself, my heirs, and assigns against the race sponsors or promoters for injury or illness which may result from my participation. I also give my permission for the use of my name and/or picture in any newspaper for any other account of this event. I further state I am in proper physical condition to compete in this race.

Members Name _____
Address _____
Age _____
Email _____ Sex, circle one M / F
Phone _____ Shirt size , circle one XS S M L XL

SIGNATURE _____ DATE _____ PARENT (IF UNDER 18) _____

Members Name _____
Address _____
Age _____
Email _____ Sex, circle one M / F
Phone _____ Shirt size , circle one XS S M L XL

SIGNATURE _____ DATE _____ PARENT (IF UNDER 18) _____

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SIGNATURE _____ DATE _____ PARENT (IF UNDER 18) _____