



# 2019 POLE CREEK CHALLENGE REGISTRATION

Saturday · February 2nd, 2019 · 10 AM

Pole Creek XCountry Ski Area



## REGISTRATION INFORMATION

PLEASE PRINT CLEARLY

<b>Name (Last, First, MI)</b>						
<b>Mailing Address</b>		<b>City</b>		<b>State</b>		<b>ZIP</b>
<b>Email Address</b>	<b>Age (Parents must sign for participants under 18)</b>					
<b>Phone</b>		<b>Gender (circle one)</b>		Female	Male	

### • CIRCLE RACE DISTANCE AND TECHNIQUE •

<b>Distance</b>	5K	10K
<b>Ski Technique*</b>	Classic (Double poling, herringbone without gliding permitted. Single or double-skating NOT allowed)	Skate (Diagonal/V skating, single & double skating permitted)

\*Racing using technique other than registered will result in disqualification from awards. Distance or technique changes may be made at race check-in.

## ENTRY FEE

Entry Type	Regular Registration (Before Jan. 25, 2019)	Late Registration (Jan. 26-Jan. 31, 2019)	Race Day Registration (Feb. 2, 2018)
Individual	\$25.00	\$30.00	\$35.00
Family (up to 4 related members; Please submit form and waiver for each family member)	\$60.00	\$65.00	\$70.00
<b>Race Entry Fee Submitted</b>	<b>Amount</b>	<b>Payment Method (circle one)</b>	
		Cash	Check (Payable to Powder Pass Nordic Club)

## WAIVER

### REQUIRED FOR PARTICIPATION

I personally assume, for myself and my family, all risks and hazards attendant to the participation in this event. I hereby agree to release, absolve, indemnify and hold harmless the Powder Pass Nordic Club, USDA Forest Service, their staff, employees, volunteers, supervisors, instructors and any other representatives, together with their agents, representatives or assigns (collectively, the "Released Parties").

I hereby waive all claims against the Released Parties for any injury, including death, any loss due to theft or damage to my personal property, or for any other consequential or incidental damages caused in any manner whatsoever where such liability is attributable to the absences of ordinary or ever slight care. I understand the terms of this document, understand that I am waiving my rights to any claims against the Released Parties, and sign it freely and voluntarily. This release includes all injuries and/or damages suffered by me before, during or after the event. I recognize, intend and understand that this release is binding on my heirs, executors, administrators, or assignees.

I certify as a material condition to my being permitted to enter this race that I am physically fit and sufficiently trained for the completion of this event and that my physical condition has been verified by a licensed Medical Doctor. By submitting this entry, I acknowledge (or a parent or adult guardian for all children under 18 years) has read and agreed to the above waiver.

Signature \_\_\_\_\_ Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

• How did you hear about this event? \_\_\_\_\_

Entry fees are nonrefundable. Submit form and fees to: Powder Pass Nordic Club PO Box 14 Buffalo, WY 82834 or Johnson County Family YMCA. Please email [powderpassnordic@gmail.com](mailto:powderpassnordic@gmail.com) with questions.