



presented by
MOUNTAIN EQUIPMENT CO-OP

South Eastern Ontario Trail Running Series 2010 Early Bird Entry Form

I will be participating in the following event(s):

| Race Date | Venue | 1/2 Marathon | Sport | Enduro | Children's Challenge |
|-----------|---------------|--------------------------|--------------------------|--------------------------|--------------------------|
| April 24 | Dundas Valley | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| June 12 | Durham | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| July 10 | Rattlesnake | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| August 7 | Terra Cotta | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| October 9 | Albion Hills | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

ATHENA (Women over 160lbs) CLYDESDALE (Men over 200 lbs)

First Name Initial Last name

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Apt. # Address

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City Prov. Postal Code

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Home Phone Cell/Business

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Email (for entry confirmation)

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Date of Birth (mm/dd/yyyy) Age on Race Day Shoe Size Gender

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Mountain Equipment Co-op Number? _____

Shirt Size: S M L XL XXL
 Youth: S M L

*Note: Register for 4 out of 5 races before April 1st 2010, receive a free Salomon technical shirt, men's and women's styles available.
 Children's Challenge participants qualify for a 100% cotton unisex t-shirt.*

Medical Information:

Health Problems None Yes (List all medical conditions):

Medications None Yes (List name and dosage):

Allergies None Yes (List type of reaction, medical action required):

Race Bib #: _____

Registration Information:

By Internet: Register on-line at www.5peaks.com
By Mail: Complete the entry form and mail with payment information to:

5 Peaks Trail Running Series
 4636 Hoskins Road,
 North Vancouver, BC V7K 2R1
 (ph. 604-988-2320)

By Fax: Fax your fully completed form with credit card payment information to 604-988-7984

Race Entry Fee:

| Race Date | Venue | 1/2 Marathon | Sport | Enduro | Children's Challenge |
|-----------|--------------|--------------|-------|--------|----------------------|
| April 24 | Dundas | | \$43 | \$43 | \$5 |
| June 12 | Durham | | \$45 | \$45 | \$5 |
| July 10 | Rattlesnake | | \$46 | \$46 | \$5 |
| August 7 | Terra Cotta | | \$40 | \$40 | \$5 |
| October 9 | Albion Hills | \$56 | \$46 | \$46 | \$5 |

Calculations:

| | Number of Races | Rate | Subtotal |
|----------------------|-----------------|------|----------|
| 1/2 marathon | | | |
| Sport | | | |
| Enduro | | | |
| Children's Challenge | | | |
| Processing fee | | \$5 | \$5 |

Sub Total A _____
 GST (5% of Sub total A) _____
Sub Total B _____

Charitable Donation (Donation receipts issued for amounts of \$50 or more)
 Big Wild \$10 \$25 \$50 \$100 Other _____
Sub Total C _____

(Sub Totals B + C) TOTAL _____

Cash Cheque Visa Mastercard

Card Number:

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Expiry Date:

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Name on Card:

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Signature: _____

Waiver and Release:

I acknowledge participating at my own risk and hereby for myself, my heirs, executors and administrators, waive and release any and all rights and claims no matter how arising I may have as a result of having participated in this event including without limitation, negligence. I expressly confirm my understanding that my participation in this event is entirely at my sole risk and that the organizers and sponsors of the event, and their respective officers, employees, agents, and all volunteers or other persons engaged in the production of the event or other wise associated with it shall have no liability for any damages sustained by me or any injury or loss, including personal or property loss, which I might suffer. I acknowledge that my image may be recorded (by video or photograph) during the events. I agree to the use of my name and image in broadcasts, newspapers, brochures, promotional material and other media without compensation. (Or of parent if under 19)

Signature (or of parent if under 19): _____ Date: _____