



- This Trail Run, which will take participants through the heart of the PA Wilds, will start in the middle of downtown Emporium, the County seat.
- There will be five age groups for the 50K endurance race: men and women under 30, 30-39, 40-49, 50-59 and 60 over.
- Each participant that completes the 12K, 25K or 50K race within the 10 hour time limit will receive a medallion. First place finishers in each age group of the 50K will receive a trophy. The overall men's and women's finisher in the 12K and 25K events will receive a trophy.
- The race will be taking place on Saturday, October 19, 2024 with a staggered start beginning at 7:30 am. Final registration deadline is Friday October 18 at noon.
- The cost will be: \$70.00 per participant in the 50k, \$50.00 for the 25k and \$40.00 for the 12k.

Name: _____

Address: _____

Phone Number: _____ Email Address: _____

Gender: M F Emergency Contact Name _____ Phone: _____

Age: _____

I know that running a trail or road race is 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, I 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, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the course, all such risks being known and appreciated by me. I understand that bicycles, skateboards, baby joggers, roller skates or roller blades, are not allowed in the race and 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 Sinnemahone Triple Crown, PA DCNR, Cameron County Chamber of Commerce, the borough of Emporium, PA, 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. 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 purpose.

Signature: _____ Date: _____

If Under 18 years old, Signature of Legal Guardian is Required:
 Signature: _____ Date: _____

All registration forms and payments should be returned to Sinnemahone Triple Crown, 34 East Fourth Street, Emporium PA 15834.