
**Intent to Participate in the 8th Triennial Finger Lakes Trail Relay
Saturday 24-September-2005 All Day**

Please submit **one form per team** to: **TRIENNIAL c/o Joe Daley**
306 E State St., Ithaca, NY 14850-4306

Please include a check for event expenses: \$5 per runner (so, \$35 per 7-person team), payable to "Finger Lakes Runners Club" (FLRC).

This entry form must be received by or on Friday 17 September 2005.

We will (e-)mail detailed instructions to all team captains on or before Monday 19 September.

All team members agree with this waiver (signature on next page)!

We, the undersigned, each accept full responsibility for ourselves and for any injury which we may incur during the Triennial Finger Lakes Trail Relay IX. We have read all of this application and we fully understand that participating in this event may be dangerous. Sprained ankles, cuts, bruises, broken bones, insect bites, lacerations inflicted by sticks or barbed wire, shocks inflicted by electric cattle fences, collisions with high speed vehicles on or off-road, and heat exhaustion or heat stroke are real possibilities that we will personally guard against. **We acknowledge that the Finger Lakes Trail was designed as a hiking path, and not for running, and that the trail was not in any way prepared specifically for this event. We have trained sufficiently for this event and will run within the limits of our training.** We will not hold any of the event organizers, volunteers, land owners, Finger Lakes Runners Club, Finger Lakes Trail Conference, Cayuga Trail Club, Sierra Club, New York State Department of Environmental Conservation, any other agency of the great State of New York responsible. **Our actions and mishaps are accountable to no one but ourselves.** We fully understand that there will be no medical or rescue personnel on the course. We understand that the event organizers may publish the results including our names, times, and photographs, for purposes directly connected with the event.

Team Name (suitable for publication): _____

Team captain: Name: _____

Address: _____

Phone: _____ **E-Mail :** _____

N.b. teams are responsible for their own support. They must be able to find their way on back roads to the assembly points. We strongly suggest that each driver have a copy of DeLorme's "New York State Atlas" as well as a set of trail maps.

Please list one runner per stage on the next page (no multiple stages, please – this is a relay). List additional runners on another page. **If under 18 parent or guardian must also sign. All runners must qualify, either (1) previous Tri, (2) FLRC trail race over 15km in previous year, (3) pre-run stage at 5 mph or faster.**