



ENTRANT #   
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# IPSWICH TRAIL RUN SERIES ON DAY REGISTRATION

FIRST NAME: \_\_\_\_\_ EMERGENCY CONTACT NAME & NUMBER: \_\_\_\_\_  
LAST NAME: \_\_\_\_\_  
DATE OF BIRTH: \_\_\_\_\_ MEDICAL CONDITIONS: \_\_\_\_\_  
GENDER: \_\_\_\_\_  
MOBILE: \_\_\_\_\_  
EMAIL ADDRESS: \_\_\_\_\_

## EVENT SELECTION: (Please Circle Your Chosen Event)

### ENTRY ROUND

Series – all three events | Round 1 – White Rock | Round 2 – Hidden Vale | Round 3 – Castle Hill

### TIMED RUNS

**LONG COURSE (\$50 each)** Open | U20 | 20-29 | 30-39 | 40-49 | 50-59 | 60+  
**Series (\$110):**

**SHORT COURSE (\$40)** U16 | Open | 40+  
**Series (\$80):**

### FREE COMMUNITY EVENTS

**COMMUNITY WALK:** Open

**KIDS:** U16

### WAIVER

I confirm that I am an age of legal consent (that is 18 years or older in Australia) and that I have read and understood the Assumption of Risk and Waiver of Liability Agreement prior to signing it. I, parent / guardian of the above participant consent to my son/daughter participating in the event organised or sanctioned by the Indemnified Persons and confirm that I have read and understood the agreement prior to proceeding with my entry.

NAME: \_\_\_\_\_  
SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_