
Tough Enough 04 April 2020

Entry & Release

I know that running a road race is a potentially hazardous activity. I should not enter and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the run. 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 rain (!!), high heat and/or humidity, traffic, and the conditions of the road or trail, all such risks being known and appreciated by me. I know that this event shall be an "open course," meaning that there will be no restrictions on vehicular traffic, and if I am participating in the ultra will involve crossing a major highway while fatigued; in all cases I assume full responsibility for my personal safety. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the City of Santa Barbara, the City of Goleta, the City of Solvang, the County of Santa Barbara, the State of California, RRCA and its employees and assigns, and all other sponsors or authorities, their representatives and successors from all claims of liabilities of any kind arising from my participation in this event. I also affirm that I understand that it would be a bitter sadness that would last the rest of our lives if someone was hurt or killed because he or she didn't take "open course" seriously. A quarter-second is all it takes.

Ultramarathon individual entry

Print name: _____ Street: _____
Sex: _____ Size: _____ City: _____
State: _____ Zip: _____
Phone: _____ E-mail: _____
Date: _____ Signature: _____

Relay team entry. Five (or fewer) person teams. One point of contact, please.

Team name: _____
Contact name: _____ Street: _____
Sex: _____ Size: _____ City: _____
Phone: _____ State: _____ Zip: _____
E-mail: _____
Date: _____ Signature: _____ Size: _____

Runner name: _____ Runner name: _____
Sex: _____ Size: _____ Sex: _____ Size: _____
Date: _____ Signature: _____ Date: _____ Signature: _____

Runner name: _____ Runner name: _____
Sex: _____ Size: _____ Sex: _____ Size: _____
Date: _____ Signature: _____ Date: _____ Signature: _____

\$44 person, **\$220** team. Checks payable to Hart Kornell. All proceeds after expenses go to Direct Relief International. Mail completed form to: TE, 2740 Williams Way, Santa Barbara, CA 93105