



## 8 K Trail Challenge & Fitness Walk at King Pine Ski Area *Sunday, October 3rd, 2010 at 10:00 AM*

To benefit the Laura Mahoney Foundation for Autism & Epilepsy  
For more information or to register online, visit [www.thelaurafoundation.org](http://www.thelaurafoundation.org)

Pre-registration \$20, Fitness Walk \$10  
(Postmarked by 9/25/10 or online by 10/1/10)  
Race Day Registration \$25, Fitness Walk \$10

Refreshments will be provided!  
T-shirts to the first 100 registrants!

**ENTRY FORM – PLEASE PRINT CLEARLY!** Incomplete or illegible forms will not be accepted.  
Please mail completed application with entry fee (Payable to the Laura Foundation) to:  
**Laura Foundation 8 K, 1251 Eaton Road, Madison, NH 03849**

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_  
City, State, Zip

HOME PHONE \_\_\_\_\_

SEX M / F                      AGE ON RACE DAY \_\_\_\_\_

Category (circle one): TRAIL RUNNER | WALKER | WHEELCHAIR

Liability Release: Upon acceptance of my entry, I, for myself, my heirs and assigns, hereby release the Laura Mahoney Foundation for Autism & Epilepsy, the town of Madison, USATF, and sponsors, officials and individuals associated with the Laura Foundation 8 K Trail Challenge & Fitness Walk from any and all liability from illness, injury or death I may suffer as a result of my participation in this event. I attest that I am physically fit and have sufficiently trained for this event and am aware that my participation could, in some circumstances, result in physical injury. I will not bring skateboards, bicycles, scooters, inline skates or dogs onto the course, per USATF regulations. I give permission for free use of my name and likeness in any broadcast, telecast or written account of these events. I also understand that the entry fee is non-transferable.

\_\_\_\_\_  
Signature of Participant                      Date

\_\_\_\_\_  
Signature of parent/guardian (if under 18)                      Date