

P. O. Box 82843, Fairbanks, Alaska 99708-2843 Hotline: 907-457-5456, Website: http://www.alaskaskijoring.org

RACE REGISTRATION	N FORM		Entry Fee Membership TOTAL PAID Check Number	\$ \$ \$
CLASS (circle all that apply):	Bikejor	Canicross	Relay Team Memb	per
Driver's Name:				
Team Name (if applicable):				
Mailing Address:				
City/State/ZIP:				
E-mail:				
Kennel name (if any):				
Sponsor(s) and/or handlers:				
Name of dog(s) being run:				
I agree to act as directed by the offinvolved in athletic outdoor wilder state that I assume all risks and was other volunteers for myself, my do event and I agree to be responsible participants are responsible for their volunteers are not responsible for a this strenuous activity.	icials of this even ness sports, inclu ive any claims of g(s) and my prop for any damages ir own dog(s), and	ding but not limited to f liability against the Ala erty. I acknowledge that that may arise by their j d that the Alaska Skijori	alling, hypothermia, frostb ska Skijoring and Pulk As I am the driver or owner of presence at this event. Furt ing and Pulk Association, I	oite, cuts and scrapes, I hereby sociation, race director, and of the dog(s) I am using for this ther, I understand that all event land owners, race sponsors, and
Signature If under 18, name of parent or g I agree to remain present while will provide a restraining facility	my minor is par	Date ticipating in this event		ely after such participating, I
Parent's or Guardian's Signatur	e	Date		

Would you like to make a trail donation to help with ASPA's expenses for grooming trails at Creamer's Field, North Star Golf Course or the Isberg Area? Recommended amounts are \$5/day, \$50/season. Donation Amount: \$_____