Official Entry Form 2025 Lost Trail Half Marathon & 5K

Granite Beach, Folsom Lake SRA



Personal Informa	tion									
Last Name				Street Address						
First Name			City				State		_ ZIP _	
Gender Male	Female	Ph	Phone							
Date of Birth				Email						
Race Day Age				Team/Club						
Please complete t	the following	registrat	ion infor	mation	:					
Category	Division									
5K 10 Mile	19 & Under	20-29	30-39	40-49	50-5	9	60-69	70+		
Prices										
			Until 12/1	Aft	er 12/1		Race Da	у		
5K Trail Run	K Trail Run		\$40	\$40 \$50		\$55				
Half Marathon			\$60		\$65		\$70			
Race Shirt (optional) Style		Size							
\$20	Men's	Women's)	KS S	M	L	XL	XXL		
Please send comp	oleted form a	nd check	to:							
Total Body Fitness 5209 Blaze Ct. Rocklin, CA 95677	Make checks payable to: TOTAL BODY FITNESS Total Amount Enclosed: \$									

TBF Racing Refund Policy

TBF Racing has a NO REFUND POLICY on all of our events. A refund requested prior to the Monday preceding the race will be given a TBF Racing Credit, set to expire at the end of the calendar year, for the amount of the entry fee minus a \$25 processing fee. CREDITS WILL NOT BE ISSUED DURING RACE WEEK.

The following TBF Racing Release Waiver must be signed by all participants:

ALL ATHLETES MUST READ CAREFULLY BEFORE SIGNING WAIVER AND RELEASE FROM LIABILITY. In consideration of my entry and of my own free will, I for myself, my heirs, executors and administrators forever waive, release and give up any claims, demands, liability damages, costs and expenses of any kind whatsoever, including personal injuries to me or wrongful death, against TOTAL BODY FITNESS, and all sponsors, subcontractors and volunteers which may rise caused in whole or in part by my or others negligence or other fault of the parties or persons I am hereby releasing by the dangerous condition of any property or equipment owned, maintained or controlled by them and, or by their liability without default. I AM AWARE OF ANY POTENTIAL HAZARDS AND I FULLY UNDERSTAND THAT I AM FOREVER GIVING UP IN ADVANCE ANY RIGHT TO SUE OR MAKE CLAIM AGAINST THE PARTIES I AM RELEASING IF I SUFFER SUCH INJURIES OR DAMAGES EVEN THOUGH I DO NOT KNOW WHAT OR HOW EXTENSIVE THOSE INJURIES OR DAMAGES MIGHT BE AND AM VOLUNTARILY ASSUMING THE RISK OF SUCH INJURIES AND DAMAGE. I have read and fully agree to the above.

Signature (Parent/Guardian if Under 18)	Date