



stripes

Presents



# THE CRAZY DESERT TRAIL 50K, MARATHON, AND HALF MARATHON

**Date:** Saturday, March 3, 2012

**Start Times:**

6:00 a.m. Registration Opens

7:30a.m. 50K

7:45 a.m. Marathon

8:00 a.m. Half Marathon

**Location:** San Angelo State Park, North Shore

**Registration:**

**By Mail:** Complete attached entry form and enclose a check payable to:  
San Angelo Road Lizards. Entries must be received by February 28, 2012.

**Online:** [www.roadlizards.org](http://www.roadlizards.org)

**Cut-Offs:** Runners will have 8 hours to complete the race. After that, the finish line will close and no aid will be available. Marathoners and Ultra runners must complete the first loop by 12:00 p.m. or they will not be allowed to start the second (overall pace of 15:25 for Ultra runners, and 18:20 for Marathoners).

**Aid Stations:** Runners will pass at least two aid stations each loop, with water, sports drink, and some nutrition. This is a trail race, so be prepared to carry water and food. Please do not leave garbage on the course!

**Awards:** A donation will be made to the Concho Valley Community Action Agency in the name of the top male/ female masters/female masters in each race.

**Benefitting:** The Stripes Crazy Desert Trail Race benefits the Concho Valley Community Action Agency and its Individual Development Accounts program. The IDA matches \$3 for every \$1 a person in poverty saves. Those funds can be used for education, to buy a home, or to start a small business. The CVCAA is a 501(c)(3) corporation.



**Entry Fees:**

	Before 2/28/2012	Day Of
Half	\$30	\$40
Marathon	\$45	\$55
50K	\$60	\$70

	Before 2/28/2012	Day Of
Half	\$30	\$40
Marathon	\$45	\$55
50K	\$60	\$70



# Special Thanks to Our Sponsors



Waiver: 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, effects of the weather (including heat and humidity), traffic and road conditions, and all other known risks by me. Having this waiver and knowing these facts on my behalf, waive and release the San Angelo Road Lizards, City of San Angelo, RRCA, race officials, volunteers, and all sponsors, their representatives and successors, from all claims and liabilities of any kind arising out of my participation in this event. A medical services volunteer will be available during the race to provide emergency services only, and only if the volunteer is available at the time of any injury. Any care delivered is not administered for or in expectation of compensation. State and federal law provides immunity or limitation of damages for the volunteer for any care delivered, and you accept this immunity from liability and limitation of damages in exchange for any care delivered.

Mail pre-registration entries to P.O. Box 2851 San Angelo, TX 76902

Make checks payable to **San Angelo Road Lizards**

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Email \_\_\_\_\_

Emergency contact name: \_\_\_\_\_

Emergency's phone: \_\_\_\_\_

Signature of participant \_\_\_\_\_

*parent signs if participant is under 18 years old*

NOTE: All participants will be required to sign a Release of Liability waiver before competing in the event.

SARL Member :	<input type="checkbox"/> Yes <input type="checkbox"/> No
Gender:	<input type="checkbox"/> Male <input type="checkbox"/> Female
Age (on race day):	_____
Military:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Event:	<input type="checkbox"/> Half Marathon <input type="checkbox"/> Marathon <input type="checkbox"/> 50K
T-Shirt Size (please circle one)	S - M - L - XL - XXL
ENTRY FEE TOTAL:	\$ _____