

Greenhorn Adventure Race

2018 Registration Form



Sat. May 5, 2018

Rocky Gap State Park - Flintstone, MD

Name: _____	City: _____
Address: _____ _____	State: _____ Zip: _____
E-mail: (mandatory) _____	Phone: _____
Gender: (circle) T-Shirt Size: (circle)	Date of Birth: Age:
F / M Men's: S M L XL XXL	____/____/____ _____
Women's: S M L XL	
Emergency Contact: _____	Emergency Contact Phone #: _____
Team Name: _____	

Division (check one only):

Solo (male) 2-person (male) 2-person (female) 2-person (co-ed) 2-person (co-ed masters)

Solo (Female) 3-person (male) 3-person (female) 3-person (co-ed) 3-person (co-ed masters)

Registration Fees:

Solo Registration Fees:	New Year: \$90* Early: \$100** Regular: \$110***
2 Person Relay Team Registration Fees:	New Year: \$160/team* Early: \$180/team** Regular: \$200/team***
3 Person Relay Team Registration Fees:	New Year: \$240/team* Early: \$270/team** Regular: \$300/team***

NO RACE DAY REGISTRATION

Total Amount Enclosed:
\$ _____

*New Year Registrations must be postmarked by 1/7/18. **Early registrations must be postmarked by 4/5/18.
***Regular Registrations must be postmarked by 4/27/18.

Mail Registration Form and check for full payment to:
(make checks payable to EX2 Adventures)

EX2 Adventures
ATTN: Greenhorn Adventure Race
11654 Plaza America Drive #181
Reston, VA 20190

Registration is on a first come, first served basis.
Limited to 350 racers/teams
Team captains will receive a confirmation e-mail once they have been officially registered in the race.
For more information visit: www.ex2adventures.com, email info@ex2adventures.com or call (703) 338-3965

Name (2nd Teammate - if applicable):

City:

Address:

State:

Zip:

E-mail: (mandatory)

Phone:

Gender: (circle)

T-Shirt Size: (circle)

Age:

Date of Birth:

F / M

Men's: S M L XL XXL

Women's: S M L XL

___/___/___

Emergency Contact:

Emergency Contact Phone #:

Name (3rd Teammate - if applicable):

City:

Address:

State:

Zip:

E-mail: (mandatory)

Phone:

Gender: (circle)

T-Shirt Size: (circle)

Age:

Date of Birth:

F / M

Men's: S M L XL XXL

Women's: S M L XL

___/___/___

Emergency Contact:

Emergency Contact Phone #: