



*A Challenge to the Top, Honoring Those Who Serve*

**“Remember our Heroes”**

An 18 mile relay beginning at Walker Lake, 12 miles north of Hawthorne, NV climbing 7000 ft. to the summit of beautiful Mt. Grant, the highest mountain in the area reaching over 11,000 ft. This course offers breathtaking scenery of Walker Lake and the surrounding mountains and desert.

**Individual and team entries are allowed. Teams shall consist of up to four persons.**

**Location**

Registration location will be Friday, September 7, 2012 at Veterans Park from 4:00 p.m. – 8:00 p.m. and race day registration will be at starting line from 6:30 a.m. to 7:30 a.m. located on the corner of Cottonwood Dr. and Hwy 95.

**Course**

Start of race is located in open parking area on Cottonwood Drive & Hwy 95. Follow Cottonwood Drive all the way through the gates and head up the mountain. GOOD LUCK!

**Race will begin at 8:00 a.m.**

Finish will be at the top of Mt. Grant where you will receive your finisher’s medal.

**Cost**

Individual pre-registration is \$75.00 if registered before August 1<sup>st</sup>, 2012, the price will then increase to \$100 for all entries received after August 1<sup>st</sup>.

Team pre-registration is \$50 per team member if registered before August 1, 2012, the price will then increase to \$75 per team member for all entries received after August 1<sup>st</sup>.

Race day registration for individual entry is \$120.00 per person and \$100 per team member.

Make Checks payable to: Veterans Memorial Park  
P.O. Box 2313  
Hawthorne NV 89415

**Contact**

Dave Womack #775-316-1953, Courtney Robinson #775-316-0735 or email [mtgrantchallenge@gmail.com](mailto:mtgrantchallenge@gmail.com) for more information.

Team Captain \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Email \_\_\_\_\_

Teams Name \_\_\_\_\_ T-Shirt Size (S, M, L, XL)

Signature #1 \_\_\_\_\_  Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature #2 \_\_\_\_\_  Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature #3 \_\_\_\_\_  Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature #4 \_\_\_\_\_  Print Name \_\_\_\_\_ Date \_\_\_\_\_

In consideration of this entry acceptance, I hereby for myself, executors and administrators, waive any and all rights of claims for damages I may have against the County of Mineral, Town of Walker Lake, Walker Lake Homeowners Association, the Mt. Grant Memorial Challenge Committee or any individual associated with the Mt. Grant Memorial Challenge relay for any and all injuries sustained by me in this event. I attest and verify that I am physically fit and have sufficiently trained for this event.