



HIKING CHALLENGE REGISTRATION FORM

Full Name: _____

Garrison: _____

Phone: _____

Email: _____

Category Completed and Patch Received

- 25 KM
- 50 KM
- 100 KM

T-Shirt Size

- | | |
|---------------------------------|-----------------------------------|
| <input type="checkbox"/> Small | <input type="checkbox"/> X-Large |
| <input type="checkbox"/> Medium | <input type="checkbox"/> XX-Large |
| <input type="checkbox"/> Large | |

I acknowledge that hiking is a physically demanding activity and carries inherent risks. I confirm that I am in good health, and I will follow all event rules and safety guidelines. I release MWR, the ARMY, and volunteers from any liability for injury, loss, or damage sustained during the Challenge.

Signature: _____

Date: ____ / ____ / ____

Entry Fee: \$ 50

Payment Method: Cash Card Online