



2025 Ouachita Trail 50 Application

April 12th, 6:00 AM
Maumelle Park - Pavilion 8
Little Rock, Arkansas

Presented by the Arkansas Ultra Running Association
Proceeds benefiting Pinnacle Mnt State Park

Last Name _____ First _____ Middle _____
Address _____
City _____ State _____ Zip _____ Phone _____
e-mail _____ Shirt size (M/W): _____ (XS, S, M, L, XL, XXL)
Date of Birth ____/____/____ Age on 04/12/2025 _____ Gender _____
50K or 50 Mile: _____
Is this your first 50k/50M-mile attempt? _____ Please list any previous years you completed the OT50:

Do you plan to camp at Maumelle Park? Y/N _____

List any medical conditions we should know of _____

Are you taking any prescription drugs? Please list: _____

Please provide a contact (name and phone number) in case of an emergency _____

Entry Fee \$ _____ (\$100 until Jan 10; \$110 until March 11th; \$120 until March 26th and \$135 thereafter; online and mail-in fees are the same. THIS DOES SAVE YOU THE RSU FEE.)

Entry limit: 200

Send application and entry fee (check payable to Ouachita Trail 50) to:

OT 50- % Stacey Shaver, 18 Laffite Circle, North Little Rock, AR. 72116.

Refund Policy: 100% of entry fee is refundable until Nov 30th; Half of fee is refundable Nov 4th - Jan 1st; No Refund after Jan 1st.

For additional information, visit the Ouachita Trail 50 website: <http://www.runarkansas.com>

e-mail: OT50@runarkansas.com

Race Waiver - PLEASE READ – This entry contains limitations of your legal rights.

I know that running an ultramarathon race is a potentially hazardous activity that could cause injury or death. I should not enter and run unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, am in good health, and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road and trail, encounters with wild or domestic animals, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the race directors and workers, Arkansas Ultra Running Association, U.S. Forest Service, and all sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, event though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to race management to use any photographs, recordings, or other records of my participation in this event for any legitimate purpose. I also understand that the race director has the right to refuse any entry, and that my registration fee is non-refundable after January 1st..

Signature _____ Date _____