



Lake Rhodhiss Trailfest



**October 10, 2026
8:00 a.m.**

Join your fellow trail enthusiasts in the woods at Valdese Lakeside Park this October.

Choose from a 3, 6, or a 12-hour challenge on a 5K loop! Go as far as you can or use the time to reach a goal distance.

For more information about the event, please visit the website below.

[www.friendsofthevaldeserec.org/
lake-rhodhiss-trailfest](http://www.friendsofthevaldeserec.org/lake-rhodhiss-trailfest)

Register online at:

[https://ultrasignup.com/
register.aspx?did=139732](https://ultrasignup.com/register.aspx?did=139732)
or mail in the application on
this the back of this flyer.

PRICING

<u>Event</u>	<u>Before 08/31</u>	<u>After 08/31</u>
3	\$35	\$40
6	\$55	\$60
12	\$75	\$80



SCAN ME!

Lake Rhodhiss Trailfest

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

E-mail: _____

Birthdate: ____/____/____ Age on 10/10/2026: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

Shirt: S M L XL XXL Race: 3hr ____ 6hr ____ 12hr ____

T-shirt guaranteed if registered by September 20, 2026

In consideration of the acceptance of this entry I hereby, for myself, my heirs, executors, administrators, and assigns, release and discharge the Friends of the Valdese Rec, its members, volunteers, promoters, managers, sponsors, and operators of the Lake Rhodhiss Trailfest and their agents, servants, employees, and the Town of Valdese, whose facilities are being used for this event, from any and all claims for damage suffered by me as the result of my participation in or traveling to or from the said event to be held on Saturday, October 10, 2026, or, if it is postponed due to weather or other reasons, on the date the event actually takes place. I also give my permission for the free use of my name and picture in any broadcast, promotion, or written account of the event. I further state that I am in proper physical condition to participate in this race and realize that trail races have a higher degree of risk to them than races held on paved surfaces.

Signature: _____

Date: _____

Parent's Signature (if participant is under 18 years old)

Please make checks payable to FVR, Inc. (Pricing on front of form.)
Mail with application to: FVR, P.O. Box 994, Valdese, NC 28690