

75TH ANNUAL

Consumers Energy

Count on Us[®]

AU SABLE RIVER



CANOE MARATHON

2023

ENTRY FORM

ENTRY FEES

Early Entry Deadline

Postmarked or Received by
Monday June 19th, 2023: \$250 USD

Main Entry Deadline

Postmarked or Received by
Monday July 3rd, 2023: \$350 USD

Late Entry Deadline

Received by 12:00 P.M. (Noon)
Monday July 24th, 2023: \$450 USD

INSTRUCTIONS

The following form is a fillable form.

- 1) Save or download this form to your computer.
- 2) Fill in all of the fields by typing into each field.
- 3) Review the information in each field carefully.
- 4) Save and print the form.
- 5) Each paddler, please sign the form with witnesses (and guardians if required).
- 6) Send completed form with payment to:
ARICM, P.O. Box 911
Grayling, MI 49738

Completed entry forms may also be presented in person to John Cherven's office in the Grayling Mini Mall before the deadlines.

Checks or money orders made payable in U.S. dollars made out to: AuSable River Canoe Marathon

PADDLER PROFILE INFORMATION

The Paddler Profile information of the entry form must be filled out completely for all participants. This will be strictly enforced.

Entry forms with incomplete information or notes such as "Same as Last Year" will be rejected.

SHIRT SIZES

To receive a shirt/jacket, you must enter your desired size(s) on the entry form.

Since these items are ordered many weeks in advance, please try to register by the Early Entry Deadline to assure you receive your desired size(s).

You will receive the shirt size you request; no exceptions or trades by the committee.

For more information, email:
registration@ausablecanoemarathon.org



Experience the Tradition – Since 1947

Hup All Night!

75th AuSABLE RIVER CANOE MARATHON
 July 25th, 26th, 27th, 28th, 29th, and 30th, 2023
 Grayling to Oscoda - Michigan

For Committee Use Only: Assigned Paddlecraft Number, date received, initials, etc.

OFFICIAL ENTRY APPLICATION

Please fill in the fields provided by typing in the form and complete the entire application. Please save and print this completed application and send with your signatures and entry fee. Incomplete applications may be rejected.
 We desire to enter the 2023 Consumers Energy AuSable River Canoe Marathon and agree to abide the rules of the race.

BOW PADDLER INFORMATION

Name:			Sex:
Date of Birth (m/d/yyyy):	Home Phone:	Cell Phone:	
Current Address:			
City:	State/Province:	ZIP Code:	
Shirt Size:	Jacket Size:	E-mail:	
Have you ever attended Crawford (Grayling) and/or Oscoda Area Schools?:		Please indicate the years attended:	
Are you a U.S. military veteran?:		If yes, please indicate which branch:	

BOW PADDLER PROFILE – Please complete every field. ("Same as Last Year" is not acceptable)

The information requested here will be forwarded to the media in conjunction with your appearance at the Marathon.

How many times have you raced the Marathon?	Best Finish:	Most recent year entered:
What is your occupation?		
What attracted you to the Marathon?		
What is your most memorable canoe racing or Marathon experience?		
What are your other canoe racing accomplishments?		
Where is your favorite place to paddle?		
Who are other family members that are involved in canoe racing?		
What is your goal for the Marathon and/or this canoe racing season?		
Please provide complete names, addresses, phone numbers &/or email addresses for your hometown area newspapers, television and radio stations:		

Bow entrant please read and sign below: The undersigned recognizes that injury and illness sometime occur to participants in competitive athletic events and herewith advise the AuSable River International Canoe Marathon (ARICM) committee that they are aware of all the factors with which they must comply to safely participate in this event. The undersigned are also aware that ARICM has no control over the weather, race conditions or the participants' conduct during the Marathon and accompanying events. By their application, the undersigned voluntarily assumes all of the risks of injury or illness that they, or their racing partner, may sustain as a result of participating in the Marathon and accompanying events. Accordingly, the undersigned waive any and all rights to claims against ARICM and/or AuSable River Canoe Marathon officers, committee members, sponsoring organizations and their employees, both jointly and severally, and hereby release and hold harmless said persons and organizations for any and all liability for injuries or illness I may suffer as the result of participating in the AuSable River Canoe Marathon. A U.S. tax form 1099 will be filed for individuals winning over \$600 in awards. Out of country paddlers winning over \$600 in awards may be subject to U.S. federal tax withholding (taxes on these awards may be offset by tax deductions for paddling expenses). If my social security number is not on file in the Marathon office, I agree to provide my number during the check-in process or after the completion of the event. Participants' minimum age requirement is 15 years. Contestants under 18 years of age must have the waiver signed by themselves and their parent or guardian. *I have received and read a copy of the rules for 2023 and agree to abide by the rules of the event.*

Signature of Paddler 1	Date:
Signature of Witness	Date:
Witness Printed Name	
Signature of Parent/Guardian	Date:
Parent/Guardian Printed Name	Parent/Guardian Telephone Number:

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STERN PADDLER INFORMATION

Name:			Sex:
Date of Birth (m/d/yyyy):	Home Phone:	Cell Phone:	
Current Address:			
City:	State/Province:	ZIP Code:	
Shirt Size:	Jacket Size:	E-mail:	
Have you ever attended Crawford (Grayling) and/or Oscoda Area Schools?:		Please indicate the years attended:	
Are you a U.S. military veteran?:		If yes, please indicate which branch:	

STERN PADDLER PROFILE – Please complete every field. ("Same as Last Year" is not acceptable)

The information requested here will be forwarded to the media in conjunction with your appearance at the Marathon.

How many times have you raced the Marathon?	Best Finish:	Most recent year entered:
What is your occupation?		
What attracted you to the Marathon?		
What is your most memorable canoe racing or Marathon experience?		
What are your other canoe racing accomplishments?		
Where is your favorite place to paddle?		
Who are other family members that are involved in canoe racing?		
What is your goal for the Marathon and/or this canoe racing season?		
Please provide complete names, addresses, phone numbers &/or email addresses for your hometown area newspapers, television and radio stations:		

Stern entrant please read and sign below: The undersigned recognizes that injury and illness sometime occur to participants in competitive athletic events and herewith advise the AuSable River International Canoe Marathon (ARICM) committee that they are aware of all the factors with which they must comply to safely participate in this event. The undersigned are also aware that ARICM has no control over the weather, race conditions or the participants' conduct during the Marathon and accompanying events. By their application, the undersigned voluntarily assumes all of the risks of injury or illness that they, or their racing partner, may sustain as a result of participating in the Marathon and accompanying events. Accordingly, the undersigned waive any and all rights to claims against ARICM and/or AuSable River Canoe Marathon officers, committee members, sponsoring organizations and their employees, both jointly and severally, and hereby release and hold harmless said persons and organizations for any and all liability for injuries or illness I may suffer as the result of participating in the AuSable River Canoe Marathon. A U.S. tax form 1099 will be filed for individuals winning over \$600 in awards. Out of country paddlers winning over \$600 in awards may be subject to U.S. federal tax withholding (taxes on these awards may be offset by tax deductions for paddling expenses). If my social security number is not on file in the Marathon office, I agree to provide my number during the check-in process or after the completion of the event. Participants' minimum age requirement is 15 years. Contestants under 18 years of age must have the waiver signed by themselves and their parent or guardian. *I have received and read a copy of the rules for 2023 and agree to abide by the rules of the event.*

Signature of Paddler 2	Date:
Signature of Witness	Date:
Witness Printed Name	
Signature of Parent/Guardian	Date:
Parent/Guardian Printed Name	Parent/Guardian Telephone Number:

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We desire to enter the 2023 Consumers Energy AuSable River Canoe Marathon and agree to abide the rules of the race.

SUPPORT CREW CAPTAIN INFORMATION

Name:		
Address:		Cell Phone:
City:	State/Province:	ZIP Code:
E-mail:		
Relationship:		

TEAM SPONSOR INFORMATION

Team Sponsors— list your two (2) primary team sponsors. These sponsors will be listed in Marathon publicity. (List two maximum)
Sponsor Name #1:
Sponsor Name #2:

TIME TRIAL INFORMATION

Time Trials for starting position— sprints will be held at approximately four minute intervals on **Wednesday July 26th 4:00-6:00 P.M.***, **Thursday July 27th, 3:00-6:30 P.M.*** and **Friday July 28th 2:00-4:30 P.M.*** Please request a first and second choice for your Time Trial time:

Sprint Slot (1 st Choice):	
Sprint Slot (2 nd Choice):	

** Times may be adjusted based upon the total number of Marathon entries.*

Note: The time trial course is **Closed to All** competitors **during the time trials event** except those paddling at their designated time. Violators will be subject to a two (2) minute Time Trial penalty.

CANOE NUMBER REQUEST

****Canoe Numbers —** In an effort to assist race officials and spectators in identifying teams, especially during night paddling, a uniform system of canoe numbers was established in 2002. The numbers will consist of a single sheet applied to each side of the canoe on the bow. The design of the sheets will include the Marathon Sponsor logo, and made of a size which will be applied directly over any number currently on your canoe. The material will be designed for easy removal after the Marathon. **Teams entering by the Early Entry Deadline may request a specific number.** Every effort will be made to accommodate such requests, however, assignment of the requested number cannot be guaranteed. Only two digit numbers from 00—99 will be assigned; no three digit numbers will be used unless the number of competing teams exceeds 100. Therefore, teams should not print shirts or other fan support items until their canoe number has been verified by the Marathon Committee, and posted to the Marathon website.

Requested Canoe # (1st Choice):	Requested Canoe # (2nd Choice):	
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CANOE DESIGN BEING USED FOR THE RACE

Since 2014, the Marathon Committee has collected a list of canoe designs used by every team for each race. If the canoe design your team will use for the Marathon changes from what is indicated on this entry form, please contact the Marathon Committee, or let the Marathon Committee know at Contestant Check-In. In order to maintain accurate historical records, your assistance in this matter is greatly appreciated.

Canoe Manufacturer:

Canoe Model:



07/24-31/2023

PARTICIPANT RELEASE OF LIABILITY WAIVER

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury or illness from participating in the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or illness does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation.

If I observe any unusual or significant hazard during my presence or participation I will remove myself from the activity and bring such hazard to the attention of the nearest official or team leader immediately. I verify that I will only participate in this event while in good health and that I will not consume any mind altering drugs or alcohol prior to or during the event that may impede my ability to participate putting myself or others at risk. I will inform the club official at the beginning of any on water activity if I am not feeling well or have a medical condition and remove myself from the activity.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS PADDLESPORT RISK MANAGEMENT, LLC; US GOVERNMENT; TAWAS AREA SCHOOLS; PROPERTY OF STEVE PRIESTAP; CONSUMERS ENERGY COMPANY; AUSALE TOWNSHIP; AUSALE INN; BRUCE LA MYLES TRUST & JOYCE A MYLES TRUST; IOSCO COUNTY ROAD COMMISSION; OSCODA AREA SCHOOLS; GILBERTS DRUG STORE, REAL ESTATE ONE NORTH; CITY OF GRAYLING; OLD AUSALE FLYU SHOP; GRYLING MIDDLE SCHOOL; RAY BBQ, BREWS AND BLUE; PENRODS AUSALE CANOE & KAYAK; JOE WAKELY; GRAYLING NATURE CENTER; OLD GRAYLING CHAMBER OF COMMERCE; their officers & directors, officials, agents, and/or employees, other participants, sponsoring agencies, commissions, sponsors, advertisers, volunteers, coaches, steerers, and, if applicable, owners and lessors of premises and equipment used to conduct the event ("RELEASEE'S"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S OR OTHERWISE.

I also acknowledge that photographs and video may be taken of me in my participation in, and attendance at this event, and hereby freely agree to allow without restriction all uses of such photos and videos in the reporting of these activities, and/or in the promotion of this event, its location, other sporting events, sport in general, and/or related purposes.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PLEASE COMPLETE ALL SECTIONS

(Participant Name: PLEASE PRINT) Address: _____

Email Address: _____ Emergency Contact Name: _____
Phone: _____ Phone: _____
Signature: _____ Date: _____

PARTICIPANTS OF MINOR AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasee's, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasee's from any and all liabilities incidental to my minor child's involvement or participation in the programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S, to the fullest extent permitted by law. I further agree to the photographic and video release set forth above.

Parent/Legal Guardian Name & Address: (PLEASE PRINT) _____ Minor DOB: _____
Address: _____ Emergency Contact # _____
Signature of Parent/Legal Guardian: _____ Date: _____



07/24-31/2023

PARTICIPANT RELEASE OF LIABILITY WAIVER

In consideration of being allowed to participate in any way in this sports activity, related events and activities, the undersigned acknowledges, appreciates, and agrees that: The risk of injury or illness from participating in the activities involved in this sport is significant, including the potential for permanent paralysis and death; and while particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury or illness does exist; and, I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S or others and assume full responsibility for my participation; and, I willingly agree to comply with the stated and customary terms and conditions for participation.

If I observe any unusual or significant hazard during my presence or participation I will remove myself from the activity and bring such hazard to the attention of the nearest official or team leader immediately. I verify that I will only participate in this event while in good health and that I will not consume any mind altering drugs or alcohol prior to or during the event that may impede my ability to participate putting myself or others at risk. I will inform the club official at the beginning of any on water activity if I am not feeling well or have a medical condition and remove myself from the activity.

I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS PADDLESPORT RISK MANAGEMENT, LLC; US GOVERNMENT; TAWAS AREA SCHOOLS; PROPERTY OF STEVE PRIESTAP; CONSUMERS ENERGY COMPANY; AUSALE TOWNSHIP; AUSALE INN; BRUCE LA MYLES TRUST & JOYCE A MYLES TRUST; IOSCO COUNTY ROAD COMMISSION; OSCODA AREA SCHOOLS; GILBERTS DRUG STORE, REAL ESTATE ONE NORTH; CITY OF GRAYLING; OLD AUSALE FLYU SHOP; GRYLING MIDDLE SCHOOL; RAY BBQ, BREWS AND BLUE; PENRODS AUSALE CANOE & KAYAK; JOE WAKELY; GRAYLING NATURE CENTER; OLD GRAYLING CHAMBER OF COMMERCE; their officers & directors, officials, agents, and/or employees, other participants, sponsoring agencies, commissions, sponsors, advertisers, volunteers, coaches, steerers, and, if applicable, owners and lessors of premises and equipment used to conduct the event ("RELEASEE'S"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S OR OTHERWISE.

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PLEASE COMPLETE ALL SECTIONS

(Participant Name: PLEASE PRINT) Address: _____

Email Address: _____ Emergency Contact Name: _____
Phone: _____ Phone: _____
Signature: _____ Date: _____

PARTICIPANTS OF MINOR AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION) This is to certify that I, as parent/legal guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above, of all the Releasee's, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Releasee's from any and all liabilities incidental to my minor child's involvement or participation in the programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEE'S, to the fullest extent permitted by law. I further agree to the photographic and video release set forth above.

Parent/Legal Guardian Name & Address: (PLEASE PRINT) _____ Minor DOB: _____
Address: _____ Emergency Contact # _____
Signature of Parent/Legal Guardian: _____ Date: _____

PADDLER 1**RELEASE OF ALL CLAIMS**
(To be signed by each non-minor participant)

I assume all risk of damage to my personal property and of personal injury or death resulting from my participation in the Au Sable River Canoe Marathon on Consumers Energy Company's land in Oscoda, Alcona and Iosco Counties, and I hereby release Consumers Energy Company, its agents and employees, from any and all liability to me or to third parties arising on account of damage to my personal property or injury to my person or my death that may occur as a result of such participation. I also hereby agree to indemnify and hold Consumers Energy Company, its agents and employees, harmless from any liability arising on account of any damage to personal property or personal injury or death that occurs in connection with use of Consumers Energy Company's land.

I acknowledge that I am aware of that there may be a risk of injury or damage involved in participating in the contemplated activities on Consumers Energy Company's property, and I acknowledge that Consumers Energy Company has made no representations to me concerning conditions on its property.

(Signature)

Name: _____
(Print Name)

Date: _____

RELEASE OF ALL CLAIMS
(To be signed by each minor participant's parent/guardian)

I assume all risk of damage to my personal property or the property of my child/ward and of personal injury to or death of my child/ward resulting from my child/ward's participation in the Au Sable River Canoe Marathon on Consumers Energy Company's land in Oscoda, Alcona and Iosco Counties, and I hereby release Consumers Energy Company, its agents and employees, from any and all liability to me or to my child/ward arising on account of damage to any such personal property or personal injury or death. I also hereby agree to indemnify and hold Consumers Energy Company, its agents and employees, harmless from any liability arising on account of any damage to personal property or personal injury or death that occurs in connection with use of Consumers Energy Company's property.

I acknowledge that I am aware of that there may be a risk of damage to my personal property or the property of my child/ward and of personal injury to or death of my child/ward resulting from participation in the contemplated activities on Consumers Energy Company's land, and I acknowledge that Consumers Energy Company has made no representations to me concerning conditions on its property.

Parent/Guardian of Minor Participant

(Signature)

Name: _____
(Print Name)

Minor's Name: _____
(Print Name)

Date: _____

PADDLER 2**RELEASE OF ALL CLAIMS**
(To be signed by each non-minor participant)

I assume all risk of damage to my personal property and of personal injury or death resulting from my participation in the Au Sable River Canoe Marathon on Consumers Energy Company's land in Oscoda, Alcona and Iosco Counties, and I hereby release Consumers Energy Company, its agents and employees, from any and all liability to me or to third parties arising on account of damage to my personal property or injury to my person or my death that may occur as a result of such participation. I also hereby agree to indemnify and hold Consumers Energy Company, its agents and employees, harmless from any liability arising on account of any damage to personal property or personal injury or death that occurs in connection with use of Consumers Energy Company's land.

I acknowledge that I am aware of that there may be a risk of injury or damage involved in participating in the contemplated activities on Consumers Energy Company's property, and I acknowledge that Consumers Energy Company has made no representations to me concerning conditions on its property.

(Signature)

Name: _____
(Print Name)

Date: _____

RELEASE OF ALL CLAIMS
(To be signed by each minor participant's parent/guardian)

I assume all risk of damage to my personal property or the property of my child/ward and of personal injury to or death of my child/ward resulting from my child/ward's participation in the Au Sable River Canoe Marathon on Consumers Energy Company's land in Oscoda, Alcona and Iosco Counties, and I hereby release Consumers Energy Company, its agents and employees, from any and all liability to me or to my child/ward arising on account of damage to any such personal property or personal injury or death. I also hereby agree to indemnify and hold Consumers Energy Company, its agents and employees, harmless from any liability arising on account of any damage to personal property or personal injury or death that occurs in connection with use of Consumers Energy Company's property.

I acknowledge that I am aware of that there may be a risk of damage to my personal property or the property of my child/ward and of personal injury to or death of my child/ward resulting from participation in the contemplated activities on Consumers Energy Company's land, and I acknowledge that Consumers Energy Company has made no representations to me concerning conditions on its property.

Parent/Guardian of Minor Participant

(Signature)

Name: _____
(Print Name)

Minor's Name: _____
(Print Name)

Date: _____