

**Elkford Children's
Swim-Bike-Run Triathlon 2018**
Registration Form and Athlete Waiver
Sunday, June 3, 2018
Starts at 12:00 am
Check in Time 11:00 am

Early Entry Fee	Late Entry Fee
Up to midnight on May 13, 2018	Until midnight June 1, 2018
<input type="checkbox"/> Shirt	*Late entries will not receive a shirt*
Cost: \$28.00 per participant	Cost: \$38.00 per participant
<input type="checkbox"/> NO Shirt – Cost: \$18.00	
Individual: Adult <input type="checkbox"/> Youth <input type="checkbox"/> Small <input type="checkbox"/> Med. <input type="checkbox"/> Lrg. <input type="checkbox"/> XLrg. <input type="checkbox"/>	
Team: Swimmer: Adult <input type="checkbox"/> Youth <input type="checkbox"/> Small <input type="checkbox"/> Med. <input type="checkbox"/> Lrg. <input type="checkbox"/> XLrg. <input type="checkbox"/>	
Biker: Adult <input type="checkbox"/> Youth <input type="checkbox"/> Small <input type="checkbox"/> Med. <input type="checkbox"/> Lrg. <input type="checkbox"/> XLrg. <input type="checkbox"/>	
Runner: Adult <input type="checkbox"/> Youth <input type="checkbox"/> Small <input type="checkbox"/> Med. <input type="checkbox"/> Lrg. <input type="checkbox"/> XLrg. <input type="checkbox"/>	
Entry Fees are 100% non-refundable. *Late registrations will not receive a technical shirt.	
Extra Barbeque Tickets: \$4.00 x _____ = _____ * Athletes/Volunteers eat free	
Total Cost: _____	

- Please register me for the 200 M Swim/5 K Bike/2.5 KM Run
 Please register me for the 400 M Swim/5 K Bike/2.5 KM Run

Individual Name: _____ Sex: M F Age: _____ * As of June 5/18
 Team Name: _____
 Swimmers Name: _____ Sex: M F Age: _____
 Bikers Name: _____ Sex: M F Age: _____
 Runners Name: _____ Sex: M F Age: _____
 Address: _____
 City: _____ Prov. _____ Postal Code: _____
 Phone: _____ Email: _____
 Swim Time: _____

- Cash Cheque Credit Card *online only at www.elkfordtri.ca

Received from _____ the sum of _____, to participate in the Elkford Swim-Bike-Run Triathlon 2018, Sunday, June 3, 2018 at the Elkford Aquatic Centre.

Please make cheques payable to Elkford Swim-Bike-Run Triathlon 2018

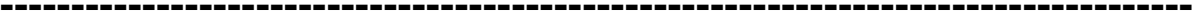
Athlete Waiver and Release of Liability

In consideration of the participation of the above-named in the activities of the District of Elkford Aquatic Centre, Parks & Recreation Department and the Elkford Triathlon organizers and volunteers, I do agree to hold free from any and all liability the District of Elkford, its Aquatic Centre and Parks & Recreation Departments and its respective officers, volunteers and employees and waive, release and forever discharge any and all rights and claims for damages which I may have or which may hereafter accrue to me arising out of or connected with me or my child/ward's participation in any activities of the District of Elkford Aquatic Centre, Parks and Recreation Department and the volunteers for this event.

I hereby do declare for myself or my child/ward to be physically sound and to have medical approval to participate in the activities of the District of Elkford Aquatic, Parks and Recreation Departments.

Athlete's Waiver and Release of Liability must be signed by all competitors OR parent/guardians, by signing this form you are consenting to your child's participation, if under 19 years of age.

SIGNED: _____
Parent & Guardian **Witness**



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**Race Bag Pick Up 5:00-7:00 pm
Saturday, June 2nd Pool Multi-Purpose Room**