

# 2018 Elkford Triathlon-Adult-June 3, 2018

## Official Entry Form

### Individual Participants:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Gender: Male: \_\_\_\_\_ Female: \_\_\_\_\_

Distance: Sprint: \_\_\_\_\_ Extreme: \_\_\_\_\_ Swim Time: \_\_\_\_\_

Category: 19 yrs & under \_\_\_\_\_ 30-39 yrs \_\_\_\_\_ 50-59 yrs \_\_\_\_\_  
20-29 yrs \_\_\_\_\_ 40-49 yrs \_\_\_\_\_ 60 yrs + \_\_\_\_\_

Shirt: Small \_\_\_\_\_ Medium \_\_\_\_\_ Large \_\_\_\_\_ X-Large \_\_\_\_\_  
No Shirt \_\_\_\_\_

PLEASE PRINT

### Team Participants:

Team Name: \_\_\_\_\_ Distance: Sprint: \_\_\_\_\_ Extreme: \_\_\_\_\_

2 person team: \_\_\_\_\_ 3 person team: \_\_\_\_\_

Categories: Male: \_\_\_\_\_ Female: \_\_\_\_\_ Mixed: \_\_\_\_\_

Age: 19 & under \_\_\_\_\_ 30-39 \_\_\_\_\_ 50-59 \_\_\_\_\_  
20-29 \_\_\_\_\_ 40-49 \_\_\_\_\_ 60 yrs + \_\_\_\_\_

Swimmers Name: \_\_\_\_\_ Shirt: Small  Med  Lrg  XLrg  No Shirt

Bikers Name: \_\_\_\_\_ Shirt: Small  Med  Lrg  XLrg  No Shirt

Runners Name: \_\_\_\_\_ Shirt: Small  Med  Lrg  XLrg  No Shirt

Ages: Swimmer \_\_\_\_\_ Biker \_\_\_\_\_ Runner \_\_\_\_\_

Note: Team Ages are calculated by the oldest members age

Do you have a child participating in the Kid's Triathlon? \_\_\_\_\_

PLEASE PRINT

Address: \_\_\_\_\_ (Mailing Address-For teams use Captains info.)

City: \_\_\_\_\_ Province/State: \_\_\_\_\_

Postal Code/Zip Code: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

PLEASE PRINT

**FEEs: Early till May 15, 2017, LATE after May 15, 2017**

Early:	NO-SHIRT		YES-SHIRT	
Individual:	\$30.00	_____	\$45.00	_____
2 Person Team:	\$60.00	_____	plus \$15.00 per shirt	_____
3 Person Team:	\$90.00	_____	plus \$15.00 per shirt	_____

**Late:** \*NO SHIRTS AVAILABLE

Extra Barbeque Tickets: \$4.00 Ea. x \_\_\_\_\_

**REFUND POLICY: All fees are NON-Transferable and NON-Refundable**

**Method of Payment:**

Cash: \_\_\_\_\_  
Cheque: \_\_\_\_\_ \* Make cheque payable to: Swim-Bike-Run Triathlon 2018  
Credit Card: \*Credit Card Payments are available online ONLY at [www.elkfordtri.ca](http://www.elkfordtri.ca)  
Total Payment Enclosed: \_\_\_\_\_  
Mail to: PO Box 13, Elkford, BC V0B 1H0

**\*\*NO REGISTRATIONS ACCEPTED PAST MIDNIGHT ON JUNE 1, 2018\*\***

**EMERGENCY CONTACT INFO**

Medical Issues we should be aware of: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Emergency Phone Number: \_\_\_\_\_

**Help our Announcer with some of your information**

Number of previous Triathlons: \_\_\_\_\_

Number of Elkford Triathlons: \_\_\_\_\_

Goal for this Race: \_\_\_\_\_

**Check in STARTS at 7:00 am**  
**MANDATORY Prerace MEETING at 8:10 am**  
**Late entries will not receive shirts**

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

## Athlete Waiver and Release of Liability

In consideration of the participation of the above-named in the activities of the District of Elkford, Leisure Services Department, 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 Leisure Services Department, Elkford Aquatic Centre and Parks & Recreation Department 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 the District of Elkford, Leisure Services Department, Elkford Aquatic Centre, Parks & Recreation Department and the volunteers and organizers of this event.

I hereby do declare myself or my child/ward to be physically sound and to have medical approval to participate in the triathlon activities on Sunday, June 4th.

**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 the age of 19 years of age.**

SIGNED:

\_\_\_\_\_  
Individual/Swimmer

\_\_\_\_\_  
Witness/Guardian

\_\_\_\_\_  
Team Biker

\_\_\_\_\_  
Witness/Guardian

\_\_\_\_\_  
Team Runner

\_\_\_\_\_  
Witness/Guardian

**Please check to make sure your entry form is  
COMPLETELY filled out.**

Visit our website at [www.elkfordtri.ca](http://www.elkfordtri.ca) for prompt race results after the race concludes.  
Due to privacy concerns, please sign below to have your name posted on our website:

SIGNED:

\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_  
Witness

I agree to allowing the use of any photos of myself on the [elkfordtri.ca](http://elkfordtri.ca) website