



REGISTRATION FORM

Event Date:
Sunday, August 20, 2017

Location:
Red Lake, Ontario

COMMITTEE/STAFF USE ONLY:

DATE PAID: _____

CASH \$ _____

CHEQUE \$ _____

REC'D BY: _____

SWIM/BIKE/RUN EVENTS:

| | | | | |
|-------|----------------|---------------|--|-----------------|
| Kids: | Ages 7 & Under | 50m/1km/500m | Adult: Sprint Distance | 750m/20km/5km |
| | Ages 8-9 | 100m/3km/1km | Olympic Distance | 1.5km/40km/10km |
| | Ages 10-12 | 150m/5km/2km | | |
| | Ages 13-15 | 300m/10km/3km | Ages 13+ may enter Sprint/Olympic Distance | |

| Please Check (✓) Box of Event You Are Registering For | FEE ON OR BEFORE AUGUST 1/17 | FEE AFTER AUGUST 1/17 |
|--|------------------------------|-----------------------|
| <input type="checkbox"/> Adult – Sprint Distance – Individual | \$30 | \$45 |
| <input type="checkbox"/> Adult – Sprint Distance – Team | \$75 | \$100 |
| <input type="checkbox"/> Adult – Olympic Distance – Individual | \$30 | \$45 |
| <input type="checkbox"/> Adult – Olympic Distance – Team | \$75 | \$100 |
| <input type="checkbox"/> Child – Kids 13-15 – Individual | \$15 | \$20 |
| <input type="checkbox"/> Child – Kids 13-15 – Team | \$30 | \$45 |
| <input type="checkbox"/> Child – Kids 10-12 – Individual | \$15 | \$20 |
| <input type="checkbox"/> Child – Kids 10-12 – Team | \$30 | \$45 |
| <input type="checkbox"/> Child – Kids 8-9 – Individual | NO FEE | NO FEE |
| <input type="checkbox"/> Child – Kids 8-9 – Team | NO FEE | NO FEE |
| <input type="checkbox"/> Child – Kids 7 & Under – Individual | NO FEE | NO FEE |
| <input type="checkbox"/> Child – Kids 7 & Under – Team | NO FEE | NO FEE |

COMPETITOR INFORMATION:

SWIMMER: Name: _____ Age: _____ Gender: M / F (circle)

Phone: _____ T-Shirt Size: (circle) Adult / Child - XL L M S XS

Mailing Address: _____ E-Mail: _____
(P.O. Box/St Address, Town, Prov., Postal Code)

CYCLIST: Same as above? YES / NO

Name: _____ Age: _____ Gender: M / F (circle)

Phone: _____ T-Shirt Size: (circle) Adult / Child - XL L M S XS

Mailing Address: _____ E-Mail: _____
(P.O. Box/St Address, Town, Prov., Postal Code)

RUNNER: Same as above? YES / NO

Name: _____ Age: _____ Gender: M / F (circle)

Phone: _____ T-Shirt Size: (circle) Adult / Child - XL L M S XS

Mailing Address: _____ E-Mail: _____
(P.O. Box/Street Address, Town, Prov., Postal Code)

WAIVER TO BE SIGNED - DUE TO THE NATURE & RISKS INVOLVED WITH PARTICIPATING IN A TRIATHLON, PRIOR TO PARTICIPATION IN THE RED LAKE TRIATHLON, A WAIVER WILL REQUIRE SIGNATURE OF EACH PARTICIPANT OR PARENT/GUARDIAN. THE WAIVER FORM WILL BE AVAILABLE AT REGISTRATION ON THE DAY OF THE EVENT.

Please mail completed forms with cheque to:

Red Lake Triathlon c/o Jennifer Szaflik, P.O. Box 55, Red Lake ON P0V 2m0

Completed forms may be dropped off with payment at the Red Lake Community Centre. The Red Lake Community Centre accepts Debit & Credit cards for payment.

Please make cheques payable to The Red Lake Triathlon.

For more information, check out our website at www.redlaketri.com or Facebook or Jenn at 728-1652