

CHEYENNE SPRINT TRIATHLON

7/11/2010

www.CheyenneSprintTriathlon.com

MAIL IN REGISTRATION

Fees:

USAT Members: \$48.00 thru May 15, 2010. May 16-June 26, entry fee is \$58.00. After June 26th, entry fee is \$68.00.

Non-USAT Members: \$58.00 thru May 15, 2010. May 16-June 26, entry fee is \$68.00. After June 26th, entry fee is \$78.00. The required 1 DAY USAT membership fee is included in all these fees.

Relay Teams: \$140.00 thru May 15, 2010. May 16-June 26, entry fee is \$165.00. After June 26th, entry fee is \$195.00. These fees do not include the required 1 DAY USAT membership fee, therefore any member of a relay who is not annual USAT member, must purchase the 1 Day USAT membership for \$10.00 at packet pick up. Each individual relay team member is required to pick up own packet, so USAT membership can be completed by each non-USAT relay team member.

Active Duty Military & F/T students: \$45.00 thru May 16, 2010. May 16- June 26, entry fee is \$55.00. After June 26th, entry fee is \$65.00. The required 1 Day USAT membership fee is included in all these fees. If you are a current USAT member, then deduct \$10.00 from the entry fee and you must provide proof of USAT membership at packet pick up. **Current military or student ID also required at packet pick up.**

All non USAT members must complete the USAT waiver at packet pick, including relay teams individuals not USAT members. Strongly suggest you pick up your packet on Saturday 7/10 from 1-4, if you are not a USAT member

When, Where & Distance:

Sunday July 11, 2010, Lions Park, Cheyenne, WY. **600 meter open water swim or 500 meter pool swim, 13 mile bike** (Standard USAT non-drafting rules will apply), **3.1 mile run**. Pool swim course intended for first timers or those individuals who cannot swim 500 meters non-stop. Only 55 pool slots available on first come, first serve basis. **Pool swim sold out as of 4/27.**

Each team member must complete this form and the medical form.

PLEASE PRINT NEATLY

First Name: _____ Last Name _____

Gender: Female ___ Male ___ Birth date: ___/___/_____

Age as of 12/31/2010: _____(Your age of Dec. 31, 2010 determines your age group)

Address: _____

City/State/ZIP: _____

Day Phone: _____ - _____ - _____ Evening Phone: _____ - _____ - _____

Email: _____

Indicate your race category:

Age Group Triathlon _____ Clydesdale/Athena _____ Relay Team _____ Aquabike _____
(Clydesdale for males 200 pounds and up; Athena for females 150 pounds and up. 2 age groups for Clydesdale/Athena and Aquabike events: 15-39 and 40 & above. No Clydesdale/Athena divisions in the Aquabike event).

Have your own **ChampionChip**? If yes what is your chip # _____

Choose one for swim course preference: Pool Swim slots sold out as of 4/27/10.

Pool Swim(500 meters & only 55 slots available on a first come, first serve basis) Pool swim intended **for first timers or those individuals who cannot swim 500 meters non-stop**

Lake Swim(600 meters) _____

Estimated 500 meter swim time(ie 15:25 is 15 minutes & 25 seconds): _____: _____(no time required if you've chosen the lake swim course).

Physically Challenged Athlete:(email Jim Mantell @ triguy1219@msn.com for comp entry info)

Relay Team-Each team member must complete the mail in registration. May be 2 or 3 per relay team.

Team Name: _____

Team Entry info: Coed _____, Male _____ or Female _____

Relay Team Swimmer Name: _____ Age _____

Relay Team Biker Name: _____ Age _____

Relay Team Runner: _____ Age _____

(Age of each individual relay member is as of Dec. 31, 2010)

Combined ages as of 12/31/2010 of all the relay team members: _____

Current USAT membership #: _____ **Exp.** ____/____/____

Your **current USAT card** and a **photo ID** are required at packet pick-up. If you do not have your USAT card you will be required to purchase a one-day USAT pass for \$10.00. **NO EXCEPTIONS.** Only competitors may pick up packets. All relay team members must pick up their own packet. **A valid photo ID is required for all competitors at packet pick up.**

If you are not a USAT member then you must purchase a one day USAT pass at packet pick-up and sign the waiver at the that time. Cash or check only accepted. **No credit cards accepted.**

Choice of breakfast burrito: w/Meat _____ Vegetarian _____

Men's T-shirt size: S ___ M ___ L ___ XL ___ XXL ___

Women's T-shirt size: S ___ M ___ L ___ XL ___

Extra Meal Tickets will cost \$6.00 each. (Meal tickets will not be sold on race day. Extra meals must be ordered & paid for by July 7, 2010)

Please indicate the correct amounts and total included. Please submit team entries together.

Entry fee Included: _____ Is your required USAT 1 Day membership fee included in this amount, if your not an annual USAT member?

_____ (Y/N)

Extra Breakfast Burrito: _____ (\$6 each: Burrito w/Meat _____ or Vegetarian _____)

Total Enclosed: \$ _____

Make checks payable to: **Tri for the High, LLC**

Mail payment to:

Jim Mantell

581 E. Idaho St.

Cheyenne, WY 82009

Day ph. 307-432-5370 Hm ph. 307-632-1663 Cph-307-221-5277

Email: triguy1219@msn.com

No race day registration. Last day to register is July 10, 2010. No guarantee on race garment or if you wait to register on July 10, 2010. **No refunds will be given, no exceptions.** However you will be allowed to transfer your spot to someone else thru July 7, 2010 for a \$10.00 transfer fee.(It is your responsibility to find someone to race in your spot). The person taking your spot will need to be a USAT member or purchase a one-day pass. Packet pick-up is Sat. July 10, 2010 from 1-4pm near the Gazebo and transition area in Lion's Park and on race day morning beginning at 5:15am. **It is highly recommended if you're a Non-USAT member that you pick up your packet on Sat 7/10/2010, as are required to completed the USAT forms.**

Optional pre-race meeting on Sat. July 10 at 4:15pm also near Gazebo and transition area in Lion's Park. If for any reason the swim is cancelled due to safety or weather, this race will be held as a duathlon. For more specific race information, refer to

www.CheyenneSprintTriathlon.com

Waiver Statement: I acknowledge that this athletic event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating &/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault. I certify that I am physically fit, have sufficiently trained for participation in the event and have not been advised otherwise by a qualified medical person. I acknowledge that the Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers of the event in which I may participate, and that it will govern my actions and responsibilities at said events. In consideration of my application and permitting me to participate in this event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Tri for the High, LLC, CCR Timing, City of Cheyenne, County of Laramie, State of Wyoming, their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether caused by the negligence of releases or otherwise. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event. I understand that at this event or related activities, I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and assigns. The Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law. I hereby certify that I have read this document; and, I understand it's content.

Name _____ Age _____

Signature _____ Date _____ (if under 18 years old, Parent or guardian must also sign) PARENT / GUARDIAN WAIVER FOR MINORS (Under 18 years old) The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Print Participant's Name _____ Age _____

Signature of Parent or Guardian _____ Date _____