Check the event that you are entering: ® Sprint ® Sprint Team ® Duathlon
® Olympic ® Olympic Team

Please print.

Name_____ **Date of Birth** ___/___/___**Age as of 12/31/11**_____

Address_____ **Sex** _____ **T-Shirt Size** _____

City _____ **State** ____ **Zip** _____**Daytime Phone** _____

Email _____**Emergency Contact** _____ **Phone** _____

If you are part of a team, each team member must complete the registration form and waiver:

Team Name_____

Other Team Member Names _____ _____

Entry Fee:	**Duathlon:**	® **$60(through July 31)**	® **$70 late (after July 31)**
	Sprint:	® **$65 (through July 31)**	® **$75 late (after July 31)**
	Sprint Team:	® **$115 (through July 31)**	® **$125 late (after July 31)**
	Olympic:	® **$70 (through July 31)**	® **$80 late (after July 31)**
	Olympic Team:	® **$120 (through July 31)**	® **$130 late (after July 31)**

You must be a USAT member to participate:

Are you a USAT member ®yes ®no

*USAT #:*_____

Check one to purchase your USAT membership payable online or at packet pick up ®**$10 one day** ®**$39 yearly**

All participants must present photo ID at packet pick-up.

Entry fee is non-refundable and non-transferable.

Payment: ® **Check** ® **Visa** ® **Mastercard**

Please make check payable to YMCA of Southwestern Indiana. The YMCA is a 501 C-3 organization and is eligible to receive tax deductible contributions. Entry fee is not tax deductible.

If paying by credit card: Acct #_____**Exp Date**_____

Online registration available at: www.evansvilleymcatriathlon.org

Please read carefully before signing this acknowledgment, waiver and release from liability.

WAIVER. I know that running, walking, cycling and swimming a triathlon is a potentially hazardous activity. I should not participate unless I am medically able and properly trained. I also know that, although police protection will be provided, there will be traffic on the course route. I assume the risk of running/cycling into traffic. I also know that, although trained lifeguards will be provided, there is risk associated with swimming in a lake. I also assume any and all other risks associated with participating in this event including but not limited to falls, contact with other participants, the effects of the weather including high heat and/or humidity, and the condition of the roads, all such risks being known and appreciated by me. Knowing these facts, and in consideration of your accepting my entry, I hereby for myself, my heirs, executors, administrators or anyone else who might claim in my behalf, covenant not to sue, and waive, release and discharge the YMCA of Southwestern Indiana, all sponsors, the State of Indiana, City of Evansville, Warrick County and Race Officials and volunteers, any and all claims of liability for death, personal injury or property damage of any kind or nature whatsoever arising out of, or in the course of my participation in this event. This Release and Waiver extends to all claims of every kind or nature whatsoever, foreseen or unforeseen, known or unknown. The undersigned further grants full permission to the YMCA, all sponsors and/or agents authorized by them, to use any photographs, videotapes, motion pictures, recordings or any other record of this event for any purpose. Application for minors will be accepted only with parent's signature.

_____ _____ _____

Participant Signature | Parent signature if participant under 18 | Date