

WARREN COMMUNITY TRIATHLON

SUNDAY 29th March 2020

Warren Swimming Pool

Athlete check-in: 8-8.30am
Pre-race briefing: 8.50am

Proudly supported by Louis Dreyfus Company, Warren Pharmacy,
Macquarie Toyota, Western Farm Machinery, Warren Shire Council.



Starting times

Mini	9.00am	100m swim, 2km cycle, 900m run (individual event only)
Short Course	9.20am	200m swim, 14km cycle, 1.8km run (individual and teams event)
Long Course	9.45am	400m swim, 21km cycle, 4.5km run (individual and teams event)

Entry fee \$10 per person per event

Further Information Audrey Weston 0408 690 954, Skye Tyrwhitt 0427 783 875 or Milton Quigley 0427 473 152

Registration

Please complete BOTH PAGES and ALL PARTICIPANTS MUST SIGN on page 2.

Either scan and email to warrenclub@yahoo.com or post to Warren Triathlon Club PO Box 49 WARREN NSW 2824. Fees can be paid via cheque and posted with form or EFT to Warren Triathlon Club BSB 06 2617 A/C 1008 5286, surname as reference. Both fees and forms must be received by close of business on Wednesday 25th March 2020.

WE HAVE A STRICT REGISTRATION POLICY. NO REGISTRATIONS WILL BE ACCEPTED AFTER WEDNESDAY 25th MARCH, AND DEFINITELY NONE ON EVENT DAY. NUMBERS ARE LIMITED SO PLEASE REGISTER EARLY.

Individual Entry

Event: MINI/SHORT/LONG COURSE (please circle)	Name: _____
Address: _____	Email: _____
Sex: Male/Female	DOB: _____ Participation Certificate: Yes/No

Team entry (Short and Long Course only)

Event: MINI/SHORT/LONG COURSE (please circle)	Team Name _____
Leg: Swimmer	
Name: _____	Address: _____ Phone: _____
Email: _____	DOB: _____ Participation Certificate: Yes/No
Leg: Cyclist	
Name: _____	Address: _____ Phone: _____
Email: _____	DOB: _____ Participation Certificate: Yes/No
Leg: Runner	
Name: _____	Address: _____ Phone: _____
Email: _____	DOB: _____ Participation Certificate: Yes/No

Participant's Agreement

This form **MUST** be signed by all competitors. Forms for those under 18 must be signed by a parent or guardian.

WARNING: This is a legal document.

I agree to compete in this event on the following basis:

1. I acknowledge that competitive triathlon, duathlon or aquathlon involves the real risk of serious injury or even death from various causes including overexertion, equipment failure, dehydration, accidents with other competitors, spectators or road users, and course or weather conditions.
2. I understand that I should not compete in this event unless I have trained appropriately and a medical practitioner has verified my physical condition if required.
3. By competing I accept all risks necessarily flowing from my participation that could result in loss of life or permanent injury. Accordingly I release all people associated with the conduct of the event from, and will indemnify them against, all liability (including liability for their negligence) for all injury, loss or damage arising out of or connected with my participation in this event. For clarification, the people released include event organisers, promoters, sponsors, managers, government and public authorities, Triathlon Australia Limited, its members, state and territory associations and all of their respective directors, officers, employees, agents, contractors and volunteers including event medical and paramedical personnel. This release and indemnity continues forever and binds my heirs, executors, personal representatives and assigns.
4. I consent to receiving any medical treatment that event organisers think desirable during or after the event.
5. I consent to event organisers using my name, image and likeness before, during or after the event, for event promotional broadcasting or reporting purposes in any media.
6. I understand that the information that I have provided herein will be included in a Triathlon Australia database and may be disclosed on occasions to the Australian Institute of Sports Commission, State Institutes and Academies of Sport and the Australian Sport Drug Agency. I also understand that information of a biographical nature including my name, date of birth, home state, results, career highlights and interests may be released to the media in response to general requests.
7. I understand that compulsory insurance cover affected for participants in this event may not cover me for all injury, loss or damaged sustained by me.
8. Safety precautions undertaken by organisers (such as course supervision, race safety briefings, bicycle and helmet safety checks) are a service to me and other competitors but are not a guarantee of safety.
9. I am fully responsible for the security of my personal possessions at the event.
10. My registration is not transferrable to other people. If I am unable to compete, or if the event is cancelled, my registration fee is non-refundable.
11. I have attached to my entry form details of any medical or physical condition from which I suffer that might affect my performance or be relevant if medical treatment is needed.
12. I agree to abide by all race rules and directions issued by the event organiser.
13. I certify that I am 18 years of age or older and I have read this document and fully understand it.

Adult Competitors

Individual OR Team Swimmer

Signature _____ Date: _____

Team Cyclist

Signature _____ Date _____

Team Runner

Signature _____ Date _____

Junior Competitors

(If you are under 18 years of age on the day of the event the declaration hereunder must be signed by a parent or guardian).

Individual OR Team Swimmer

I certify that I am the parent/guardian of _____ who will be _____ years of age on the day of the race and that he/she has my consent to compete and is bound by the above agreement.

Name: _____ Signature: _____ Date: _____

Team Cyclist

I certify that I am the parent/guardian of _____ who will be _____ years of age on the day of the race and that he/she has my consent to compete and is bound by the above agreement.

Name: _____ Signature: _____ Date: _____

Team Runner

I certify that I am the parent/guardian of _____ who will be _____ years of age on the day of the race and that he/she has my consent to compete and is bound by the above agreement.

Name: _____ Signature: _____ Date: _____