

# Warren Community

## Triathlon Registration

**For more info:**

Audrey Weston 0408 690 954  
or Simone Fletcher 0409 174 407

Warren Swimming Pool

Sunday, 26th March 2023

Check-in 8-8.30am

- 9am Mini: 100m swim, 2km cycle, 900m run (individual event only)
- 9.20am Short Course: 200m swim, 14km cycle, 1.8km run (individual & teams event)
- 9.45am Long Course: 400m swim, 21km cycle, 4.5km run (individual & teams event)

**Entry fee:**  
\$10 per person per event  
NO REGISTRATIONS ON THE DAY

**ABSOLUTELY NO REGISTRATIONS ON THE DAY**

**Please complete both pages and sign page 2. Scan and email to warrentriathlon@yahoo.com and EFT fee to Warren Triathlon Club BSB 062617 A/C 1008 5286, surname as reference. Registrations close COB Wednesday 22nd March 2023**

**Individual entry**

Event: MINI/SHORT/LONG COURSE (please circle) Name: \_\_\_\_\_ M/F \_\_\_\_\_  
Address: \_\_\_\_\_ Mobile \_\_\_\_\_ M/F \_\_\_\_\_  
DOB: \_\_\_\_\_ Participation certificate: Yes/no (please circle)

**Team entry (Short and Long Course only)**

Event: MINI/SHORT/LONG COURSE (please circle) Team name: \_\_\_\_\_  
**Swimmer:** Address: \_\_\_\_\_ Mobile \_\_\_\_\_  
M/F \_\_\_\_\_ DOB: \_\_\_\_\_ Participation certificate: Yes/no (please circle)  
**Cyclist:** Address: \_\_\_\_\_ Mobile \_\_\_\_\_  
M/F \_\_\_\_\_ DOB: \_\_\_\_\_ Participation certificate: Yes/no (please circle)  
**Runner:** Address: \_\_\_\_\_ Mobile \_\_\_\_\_  
M/F \_\_\_\_\_ DOB: \_\_\_\_\_ Participation certificate: Yes/no (please circle)

*Proudly sponsored by Louis Dreyfus Company, Warren Pharmacy, Macquarie Toyota,  
Western Farm Machinery & Warren Shire Council*

**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 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 Academics 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 transferable 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. 14. I acknowledge that the leading cause (more than 90%) of non-traumatic sudden death of athletes is related to a pre-existing cardiac abnormality.

**Adult competitors - Individual OR Team**

Swimmer signature \_\_\_\_\_ Date: \_\_\_\_\_ Cyclist signature \_\_\_\_\_ Date: \_\_\_\_\_

Runner signature \_\_\_\_\_ Date: \_\_\_\_\_

**Junior competitors - (if you're under 18 years of age on the day of the event the declaration above 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: \_\_\_\_\_

**Individual OR 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: \_\_\_\_\_

**Individual OR 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: \_\_\_\_\_