

BLACKLAND TRIATHLON & Little Buggy Kids Tri

Circle One: **Sprint** **Sprint Relay** **Little Buggy Kids Tri**

Name _____

Address _____

City _____ State _____ Zip _____ Phone# _____

Sex M F **Race Age on 12/31/18** _____ DOB(mm/ dd/ yy) _____ Swim Time _____

Email Address _____ USAT # _____

Name & Phone Number of Parent or Legal Guardian _____

Race Day Emergency Contact & ph # (if different than above) _____

Clydesdale/Athena Weight (if applicable) _____

T-Shirt Size: circle **Youth:** S M L **Adult: MENS** S M L XL XXL(\$2) or **WOMENS** S M L XL

Fill out below for relay only—must be teams of two or three

Please circle your leg: Swim Bike Run
 Other relay team members: (Each Team member must fill out their own registration sheet w/ signed waiver and must pick up their own packet. NO exceptions.)

Name _____ Which Leg _____

Name _____ Which Leg _____

Team Name _____

Registrations must be postmarked by Aug 15th, 2018

Make Checks Payable to: **Punch Buggy Productions PO Box 181373 Dallas, TX 75218**

You will receive email confirmation of registration

ENTRY FEES Sprint: \$50 by Dec 31, '17 - by June 15 \$65, by Aug 15th \$80, after Aug 15th - \$95
Sprint Relay: \$85 by Dec 31, '17 - by June 15 \$105, by Aug 15th \$120, after Aug 15th - \$135
Youth: \$30 by Dec 31, 17—by June 15 \$35 by Aug 15th \$45, after Aug 1st - \$55

ENTRANT'S RELEASE: In consideration of the acceptance of this registration entry, you represent and warrant that you are the parent or legal guardian of the said participant and have the legal authority to enter into this agreement on their behalf, or you are the registrant. I, the registrant, assume full and complete responsibility for any injury or accident, which may occur during my participation in the event, or while I am on the premises of this event. I hereby release and hold harmless Punch Buggy Productions, USAT, the sponsors, promoters, contributors and all other persons and entities associated with this event and their agents or employees from any and all injury or damage whether such injury or damage be caused by the negligence, the gross negligence, or misrepresentation of the sponsors, promoters, contributors, or any other person or entity associated directly or indirectly with the event or their agents or employees. I will not enter minor participant unless medically able and properly trained. I also know that, although police protection will be provided, there may be traffic on the course route. I assume the risk associated with this event, including but not limited to high heat and/or humidity, and the conditions of the roads, all such risks being known and appreciated by me. Fees are non-refundable. I expressly assume the responsibility for any and all acts committed by me that result in bodily injury or property damage. Further, I hereby grant full permission to any and all of the foregoing to use any photographs, videotapes, motion picture, recordings, or any other record of the event. I have read the foregoing and certify my agreement. As a parent/legal guardian of the above-named minor child, I also hereby give my consent for any emergency medical treatment from medical personnel as approved by a member of the Event staff in case of injury or illness while participating in this event. I understand that if possible, I will be immediately notified of any emergency, but this consent is intended to avoid undue delay and to assure prompt attention. I agree to accept financial responsibility for any medical expenses arising out of or resulting from such emergency. I agree that pictures taken during event may be used for future promotional purposes and give my consent for their use without remuneration. IN ABSENCE OF SIGNATURE, REGISTRATION WILL BE INVALID.

 Participants Name

 Date

 Parent/Guardian signature (if under 18)

 Date