

Dive, Ride, Stride

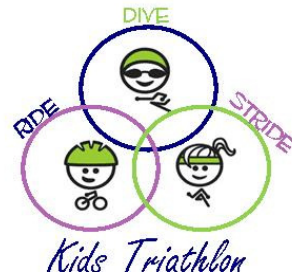
Kids Triathlon

August 16, 2014

Race Information:

Location: Start – Legion Street Pool

Time: 8:00 a.m.



Racers are responsible for providing their own bicycles, helmets, & goggles the day of the race.

Entry Fee: Entries **MUST** be RECEIVED before 7/31/14 to qualify for the Early Registration \$15 Discount. Online registration is available at www.johnsoncitytn.org/parksrec until midnight August 14. All hand delivered registration forms must be taken to Memorial Park Community Center, 510 Bert Street, before Saturday, August 16. **NO RACE DAY REGISTRATION.**

Registration BY 7/31/14: \$25

Registration AFTER 7/31/14: \$40

Packet Pickup: 9a.m. – 8p.m. Friday, August 15 at Memorial Park Community Center, 510 Bert Street. There will be **NO** other packet pickup times available.

Mail To: Memorial Park Community Center, 510 Bert St., Johnson City, TN 37601
Make Checks Payable to: City of Johnson City



There will be NO race day registration or packet pickup.
Racers are responsible for providing their own bicycles, goggles, and helmets for the day of the race.



First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____ Email: _____

Date of Birth: ____/____/____ Age on race day: _____ Sex (circle one): M or F

T-shirt Size(check one): YMedium YLarge ASmall AMedium ALarge

T-shirts & Medals: ONLY Early Registered participants are guaranteed a t-shirt & medal

Individual Race (select one):

- Ages 6-8
 Ages 9-10
 Ages 11-12

Team Race (select one):

- Ages 6-8
 Ages 9-10
 Ages 11-12

Team Name (please print):

*all team members must be in the same age group

WAIVER AND RELEASE: In consideration of accepting this entry, I, the undersigned, intending to be legally bound, hereby for myself, my heirs, executors and administrators, waive and release any and all claims for personal injury or property damage, of whatever form and nature, I may have against the City of Johnson City, its affiliates and/or subsidiaries, co-sponsoring organizations, and all other persons, acting on behalf of the foregoing organizations, stemming from or arising as a result of my participation in any of the events of the Dive, Ride, & Stride Kids Triathlon. I attest and verify that I am physically fit and sufficiently trained to participate in any of the events that I enter. I also give my permission for the free use of my name and picture in any newspaper write-up, "broadcast", "telecast", or other written account of this event.

Signature of parent or guardian _____
(If participant is under the age of 18)

Payment Method: _____ Check _____ Cash **Bib #:** (To Be Assigned By Race Management) _____ DiveRideStride2014