

6th ANNUAL BRUNSWICK SLSC TRIATHLON



Sunday SEPTEMBER 26TH 2010

All proceeds go to
Brunswick Surf Life Saving Club

Register at the Brunswick Heads Sound Shell

From 7:30am

Race starts 9:30am

Entry Fees: Individual \$30 13-18years \$20

Teams \$20 per person

Team categories: All Male All Female

Mixed Under 18

For more info www.brunswickslsc.org

THANK YOU TO OUR SPONSORS



2010 Brunswick Heads Triathlon

26 September 2010 - Entry Form

Please complete the details below in block letters

INDIVIDUAL OR TEAM SWIMMER – Teams must consist of 2 or 3 people

Surname _____ First names _____
Date of Birth _____ Male Female
Street _____
City/Town _____ State _____ Postcode _____
Phone – Home _____ Phone – Work _____ Mobile _____
Email _____

TEAM CYCLIST

Surname _____ First names _____
Date of Birth _____ Male Female
Street _____
City/Town _____ State _____ Postcode _____
Phone – Home _____ Phone – Work _____ Mobile _____
Email _____

TEAM RUNNER

Surname _____ First names _____
Date of Birth _____ Male Female
Street _____
City/Town _____ State _____ Postcode _____
Phone – Home _____ Phone – Work _____ Mobile _____
Email _____

TEAM NAME _____

CATEGORY:

All Male Team All Female Team Mixed Team Under 18 team

Age Category

13-17 years

Male

Female

18+ years

Male

Female

Teams – per person

Fees

\$20

\$30

\$20

Entries taken on day – from 7.30am at the Sound Shell in Brunswick Heads

Check in time: 7.30 am

Race Start 9.30 am

No flippers/fins

No mask or snorkel

No Barefeet

Wetsuits OK

FOR MORE INFORMATION

Phone: 02 6685 1624

email: admin@brunswickslsc.org

website www.brunswickslsc.org

SUPPORTING THE BRUNSWICK SLSC, BRUNSWICK VALLEY RESCUE SQUAD

SIGN PARTICIPANTS AGREEMENT OVERLEAF



PARTICIPANTS AGREEMENT

WARNING: This is a legal document that affects your rights.

1. I acknowledge that competitive triathlon 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, course or weather conditions and other causes.
2. I understand that I should not compete in this event unless I have trained appropriately and my physical condition has been verified by a medical practitioner.
3. By competing, I accept all risks necessarily flowing from my participation which could result in loss of life or permanent injury. Accordingly, I release all persons or corporations associated directly or indirectly with the conduct of the event from all claims, demands and proceedings arising out of my participation and I hereby indemnify them against all liability (including liability for their negligence and the negligence of others) for all injury, loss or damage arising out of or connected with my participation in this event. This release shall extend to and include ASA Sports, Triathlon Australia Inc., Triathlon Queensland Inc., and their respective directors, partners, managers, officers, agents, contractors, employees and volunteers including medical and paramedical personnel appointed for the event, the owners, licensees and occupiers of land upon which the event or any part of it is conducted, any statutory body or local authority having control over any land upon which the event or any part of it is conducted or which is involved directly or indirectly with the event in any manner whatsoever and promoters, sponsors and even organisers. This release and indemnity continues forever and binds my heirs, executors, personal representative and assigns.
4. I consent to receiving any medical treatment, including ambulance transportation that the 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 compulsory insurance cover effected for participants in this event may not cover me for any or all injury, loss or damage sustained by me.
7. 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.
8. I am fully responsible for the security of my personal possessions at the event.
9. My registration is not transferable to other people. If I am unable to compete, or if the event is cancelled by way of circumstances beyond the control of the event directors, my registration fee is non-refundable.
10. I have listed below my medical or physical conditions from which I suffer that might affect my performance or be relevant if medical treatment is required. I accept the risk of competing, despite these conditions.
11. I agree to abide by all race rules and directions issued by Triathlon Australia and the event organiser.
12. Event organisers may change the event format, course or other race conditions at their discretion. If that occurs, this agreement applies to the changed conditions.

Medical Conditions (see item 10) _____

I certify that I am 18 years or older and I have read this document and fully understand it.

	Full name	Signature	Date
Individual			
Team Swimmer			
Team Cyclist			
Team Runner			

As a parent or guardian of the competitor – * I agree to the above for myself and on behalf of my child. *I Indemnify and will keep indemnified all people or corporations associated with the conduct of the event on the terms referred to.

	Full name	Signature	Date
Parent or Guardian			
Parent or Guardian			
Parent or Guardian			