



# 2008 SERIES ENTRY FORM



First Name: \_\_\_\_\_ Last Name \_\_\_\_\_

Street Address or PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Work Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_ T-shirt size: \_\_\_\_\_ S \_\_\_\_\_ M \_\_\_\_\_ L \_\_\_\_\_ XL

Sex: \_\_\_\_\_ M \_\_\_\_\_ F Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age on Race Day \_\_\_\_\_

USAT Member Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

- \* T-shirt included for Lake Dunmore Triathlon. T-shirts available for sale at June 22<sup>nd</sup> & July 13<sup>th</sup> events.
- \* Relay Teams- Mail one form per entrant together with entry fee.

**Division Choice:** Please check event and division: Individual Relay Team

<b>Sunday, June 22<sup>nd</sup> Vermont Sun Triathlon</b> (600 yd Swim, 14 mi Bike, 3.1 mi Run)	<b>\$50</b> _____	<b>\$75</b> _____
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<b>Sunday, July 13<sup>th</sup> Vermont Sun Triathlon</b> (600 yd Swim, 14 mi Bike, 3.1 mi Run)	<b>\$50</b> _____	<b>\$75</b> _____
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<b>SATURDAY, August 2<sup>nd</sup> Lake Dunmore Triathlon</b> (.9 mi Swim, 28 mi Bike, 6.2 mi Run)	<b>USAT MEMBER</b>	<u>Individual</u>	<u>Relay Team</u>
	<b>NON-USAT MEMBER</b>	<b>\$75</b> _____	<b>\$100</b> _____
		<b>\$85</b> _____	<b>\$130</b> _____



\* Lake Dunmore Triathlon includes a t-shirt and post race meal for all entrants. USAT membership is required. All team members must either be USAT annual members or purchase a one-day USAT license for \$10. NOTE: The \$10 one-day license (for 3 team members) is already added onto the Relay Team – Non USAT rate above.

**Please send completed registration form and check made payable to Vermont Sun to:**

Vermont Sun, 812 Exchange St., Middlebury, VT 05753

### WAIVER

Read carefully before signing. In consideration of the acceptance by sponsors of my entry in this event, I hereby waive any liability the sponsors may have to me arising out of my participation in this race, furthermore, I have read the rules and regulations of the event and as a participant in this event I hereby agree to hold harmless Vermont Sun, USAT and all sponsors of this race for any damages either physical, personal, or property which may arise in relation to my participation in this event. I am aware that participation in this race may present a serious strain to my body or its parts and I further warrant to the sponsors that to the best of knowledge I am in proper physical condition to allow me to participate.

Entrant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent or Guardian if entrant under 18 yrs)

**Team Name** \_\_\_\_\_

### Team Members:

Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_

Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Gender \_\_\_\_\_ Age \_\_\_\_\_

**Refund Policy:** Registrations may be transferred to another race within the current years' series providing it is requested prior to race day. Absolutely no refunds.