

Young Life Triathlon Registration

Registration includes entry fee and lunch. Lunch for non-racers available for purchase on race day.

First name _____

Last name _____

Address _____

City State Zip _____

Phone _____

Email _____

Date of birth _____ **Age (race day)** _____

Gender Male Female

T-shirt size S M L XL XXL

Division

- Olympic Individual
- Olympic Relay
- Sprint Individual
- Sprint Relay
- Friday Night 5K
- Kiddie Run

Entry Fee

Postmarked by March 31: Individual \$50 / Relay \$75
5K \$15 / Kiddie Run \$10
April 1 - Day before race: Individual \$60 / Relay \$85
5K \$20 / Kiddie Run \$10

- **Entry fees are nonrefundable**
- **No day of race registration for the Triathlon**
- **Race day registration for 5K & Kiddie Run only**

Make checks payable and send to

Young Life Triathlon
PO Box 970
Detroit Lakes, MN 56501

Relay team information

Relay team name _____

Swimmer _____

Biker _____

Runner _____

Each team member must submit an entry form.
Please send all forms together.

The Young Life Triathlon - Presented by Scheels

Acknowledgement of Inherent Risk, Waiver and Release

1. I acknowledge and understand that there are inherent risks associated with participating in the Young Life Triathlon events, including, but not limited to, those caused by terrain, facilities, temperature, weather, conditions of the athletes, equipment, vehicular traffic, actions of other people, including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. I will assume all of the risks associated therewith, whether known or unknown to me at this time. I acknowledge and certify that I am fit to run in this event, have sufficiently trained for participation in this event and have not been advised otherwise by a qualified medical person. I hereby consent to medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event.
2. In consideration of permitting me to participate in the Young Life Triathlon events, I release the following entities and/or persons and their directors, officers, employees, and agents from responsibility for my accidental physical injury, including death or illness, and loss of, or damage to, personal property while participating in this race: Young Life; the City of Detroit Lakes; Becker County; Lakeview Township; Pickle Events, LLC; Scheels All Sports, Inc.; and, the event holders, sponsors, directors and volunteers. This release is also intended to include all claims made by my family, estate, heirs, personal representative or assigns. I acknowledge and certify that I will indemnify and hold harmless the entities and/or persons mentioned in this paragraph from any and all liability and/or claims made by other individuals and/or entities as a result of my actions during the Young Life Triathlon.
3. **Acknowledgement of Inherent Risk, Waiver and Release for Minor Triathlete**
If I am under age 18, my parent or guardian, by signing below, also consents to my release and he or she agrees that this release shall be binding upon him or her as my parent or guardians to me and my estate, heirs, personal representatives and assigns. My parent or guardian acknowledges that I am fit to participate in this event, as stated in paragraph 1. My parent or guardian also promises, by signing below, to defend, indemnify and hold Young Life, and the other entities and/or people named in paragraph 2, harmless from any claim asserted by me against Young Life and the other entities and/or people set forth in paragraph 2, including their trustees, employees and agents, if I should repudiate this release after obtaining adulthood.
4. **Photo Release** I understand that at this event I may be photographed. I agree to allow my photo, video or film likeness and sound recordings of me to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assignees, without compensation or approval rights.

Signature of adult triathlete or parent or guardian of minor _____

Printed Name of Triathlete _____ **Date** _____