

SUNSET BOULEVARD, DIPOLOG CITY MAY 5 - 6, 2018

MAY 5, 2018 (Sat)
• SUPER TRI KIDS



DECISTRATION FORM

NOTE: PLEASE FILL THE FORM LEGIBLY. ENTRY FORMS NOT FILLED-I					• FUN DISTANCE (400m Swim - 10k Bike - 2.5km Run)				
FIRST NAME	LL THE FORM	LEGIBLY. ENTRY	FORMS NOT F	LAST NAME	ERLY WILL NOT BE	PROCESS	ED.		
EMAIL				TELEP	TELEPHONE / CELLPHONE NO.				
CITY / TOWN			TEAI	М	·				
AGE (ON DEC. 31, 2018) BIRTHDATE(MON. DAY, YEAR Example: JAN. 1, 1980)									
EMERGENCY CONTACT PERSON					EMERGENCY CONTACT NUMBER				
T-SHIRT SIZE									
RACE CA	TEGORII	ES		REGIS	TRATION SCI	HEDULE	E		
				DATE	LONG & SPRINT	RELAY PER HEAD	FUN	STK SUPER TRI KIDS	
LONG DI	STANCE		EARLY BIRD	UNTIL MAR.15	P2,500	P2,000	P2,000	P1,000	
MALE	FEMALE		REGULAR	MAR.16-APR.1	P3,000	P2,300	P2,300	P1,300	
24 & Under25-29	29 & Und 30-39	er	LATE	APR.16-30	P3,500	P2,500	P2,500	P1,500	
O 30-34 O 35-39	O 30-34 O 40 & Above		WAIVER / RELEASE FORM						
○ 40-44○ 45-49○ 50 & Above	O RELAY	the City of instrument	In consideration of my entry, I, my heirs, executors and administrators release and forever discharge the City of Dipolog, its officers, staff, sponsors, servants, agents and subcontractors, instrumentalities, and all voluntary community groups, and all organizations assisting this event, producers, their agents and representatives of all liabilities, claims, damages or cost, which I may						

SPRINT DISTANCE

MALE	FEMALE
29 & Under	34 & Under
O 30-39	○ 35 & Above
○ 40 & Above	

FUN DISTANCE

O Male open O Female open

GENDER	AGE GROUP			
O Male	O 6-8	O 11-12		
O Female	9 -10	O 13-16		

SUPER TRI KIDS

have against them arising out of, or in any way connected with my participation in this event.

I understand this waiver includes claims based on negligence, action or inaction of any above parties. I fully recognize the difficulties of this event and declare that I am physically fit and able to compete in this event safely, and not have been told otherwise by a medically qualified person. Furthermore, I certify that I have secured for myself a life and accident insurance coverage up to the third party liability to answer for any damages or loss of life and property that may occur in this particular event.

I grant the Organizers/Sponsors full permission to use his/her photographs and/or motion pictures, recordings or other records of the Event featuring the undersigned for any legitimate purpose, including commercial advertising.

I also understand that this registration is non-transferable and non-refundable. I agree that in the event of race cancellation due to storm, rain, inclement weather, wind or any other unforeseeable, or "act of God" conditions, my entry fee shall be non refundable.

I have carefully read this entry form and agree to abide by all rules and directions of all race officials on the day of the race.

Signature	Date	Parent's / guardian's signature over printed name if entrant is under 18 years old

ACKNOWLEDGEMENT RECEIPT / CLAIM SLIP

(NAME, SIGNATURE & DATE)

FIRST NAME	LAST NAME
RECEIVED AMOUNT:	O LONG O SPRINT O SUPER TRI KIDS O EARLY BIRD O REGULAR O LATE
RECEIVED BY: (NAME, SIGNATUR)	MAY 5, 2018 (Sat) • LONG DISTANCE - INDIVIDUAL, RELAY, TEAM CHALLENGE • SPRINT DISTANCE • SUPER TRI KIDS 13-16 • FUN DISTANCE • FUN DISTANCE • Www.sugbutriathlon.com

