ANTHEM SPRINT TRIATHLON

PERSONAL INFORMATION

Last Name_____ First Name_____

Address_____ City_____ State_____ Zip_____

Gender_____ Age_____ Date of Birth_____/_____/_____

Email Address_____ Phone Number_____

T-Shirt Size S M L XL XXL(+2.50) Youth S Youth M Youth L

RACE

Adult Triathlon___
Kid's Triathlon___
Relay_____

CATEGORY

Age Group___
Clydesdale___
Athena___

RELAY INFORMATION

Team Name_____
Swimmer_____
Cyclist_____
Runner_____

FEES	*Before 6/15*	*Before 7/15*	*Before 8/16*	*Before 8/23*
Adult Triathlon	$69	$79	$89	$99
Kid's Triathlon	$39	$49	$59	$69
Relay	$100	$100	$125	$150

Please make checks payable to **4 Peaks Racing** and remit to:
4 Peaks Racing
PO Box 74545
Phoenix AZ 85087

In submitting this entry, I, intending to be legally bound for myself, my heirs, executors, and administrators waive, release and forever discharge any and all rights and claims for damages I have or may have against the organizers of this event, its principals, its employees, its volunteers, all sponsors and their representatives for any and all claims and damages, demands actions whatsoever in any manner, as a result of my participation Anthem Sprint Triathlon, including travel to and from the event. I hereby consent to medical treatment in the event of injury, accident and/or illness during the event. I hereby grant full permission to any and all of the foregoing to use my name and likeness in any broadcast, telecast, video or print media reporting or advertising of the event without compensation. If you are under 18, a parent or legal guardian must sign this form.

PRINT NAME_____DATE_____

SIGNATURE (Guardian to sign if under 18)_____