

2009 Cornman Triathlon Entry Form

Individual Clydesdale Athena Team (choose One) Co-Ed/Men/Women

Team Name: _____

T-Shirt
(If team, Indicate # of Each)

M- _____ L- _____ XL- _____

Individual/Swimmer

Name _____ Age on 7/05/2009 _____ Age on 12/31/2009 _____

Sex Male Female

Address _____ City _____ State _____ Zip _____

Evening Phone _____ Email _____ Usat # _____

Biker

Name _____ Age on 7/05/2009 _____ Age on 12/31/2009 _____

Sex Male Female

Address _____ City _____ State _____ Zip _____

Evening Phone _____ Email _____ Usat # _____

Runner

Name _____ Age on 7/05/2009 _____ Age on 12/31/2009 _____

Sex Male Female

Address _____ City _____ State _____ Zip _____

Evening Phone _____ Email _____ Usat # _____

Individual Fees

\$55 Postmarked By 6/01/09 \$ _____

\$65 Postmarked By 7/01/09 \$ _____

\$75 Day of Race 7/05/09 \$ _____

\$10 less if you have a USAT Membership \$ _____

Team Fees

\$110- Postmarked By 6/01/09 \$ _____

\$130 Postmarked By 7/01/09 \$ _____

\$150 Day of Race 7/06/09 \$ _____

\$10-Less if you have a (per person) USAT
Membership \$ _____

Make Check Payable To: Cornman Triathlon

I understand that I (and both of my teammates) will be required to sign an additional acknowledgement of liability waiver/release

form when I pick-up my pre-race packet. All participants under 18 put have a parent/guardian sign the waiver @ packet pickup.

Individual Participant/Team Captain Signature _____ Date _____