



BIB # _____

FOR YOUTH DEVELOPMENT[®]
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YMCA RACE WEEKEND

Sprint Triathlon, Aqua Bike, 8K Trail Race @ GREEN LAKES

39th YMCA Sprint Triathlon, AquaBike and 8k Trail Race

Corporate Registration or In Person

- TRI and AQUA BIKE Saturday June 9, 2018: \$75
- 8K Trail Race Sunday June 10, 2018: \$40
- BOTH Events Saturday and Sunday: \$100

Last Name: _____ First: _____

Address: _____

City: _____ Zip: _____ Phone: _____

Email: _____

Gender: _____ Age on Race Day: _____ DOB: _____

Company Representing: _____

Emergency Contact: _____ Phone #: _____

Shirt Size: Men _____ Female _____ Size _____ Are you a cancer survivor? Yes ___ No ___

TRI Specific:

Swim Waves: The 1st wave will be male, 2nd female, and the 3rd will be teams and those desiring a less crowded start.

Swim Wave: Men _____ Female _____ Third _____ Is this your first triathlon? Yes ___ No ___

Lunch? Yes ___ No ___ Select Hotdog Veggie Burger

Team Name _____

WAIVER:

Medial Explanation—MUST BE COMPLETED AND SIGNED BY ALL ATHLETES

I, the undersigned do hereby waive and release the YMCA of Greater Syracuse, sponsors, officials, and municipalities through which the race is run, from all liabilities and claims arising from my participation in this race.

I grant permission to use photos , videos, or any other records of this race for any legitimate purpose.

I have read or heard the rules to this race. I attest that I am physically fit and have sufficiently trained for this race:

Participant Signature: _____ Date: _____

*Parent/ Guardian Signature: _____ Date: _____

*Required for all participants under 18 years of age

**Completed Forms Should be sent to
Jennifer Hughes**

**YMCA of Greater Syracuse
340 Montgomery Street
Syracuse NY 13202**

Fax: (315) 474-6857

Email: jhughes@syracuseymca.org

FOR OFFICE USE ONLY:

Corporation Name: _____

PROCESSED BY _____ ON _____