



Snake River Triathlon

April 16 (SWIM) – 3-9pm
April 17 (BIKE/RUN) – 10:00am



RACE: The race is a 500-yard pool swim, 12-mile bike and 2-mile run. The SWIM will be FRIDAY NIGHT between 3:30-8:30pm at the Asotin County Family Aquatic Center in Clarkston, WA. We have a handicap for those that do not swim (See website for details). Swim is also offered in Spokane for an additional \$5.00 (Details on the website). The Bike is an out and out and back going out Tammany Creek Road and turning around just past the Rockin' Y Arena. The run is also out and back, going out 1 mile (North) on the levees and returning to the finish line.

REGISTRATION: Online at active.com or hard-copy.

PARKING & CAMPING: Hell's Gate has regular, ten, cabin and RV camping. 208-799-5015.

PACKETS: will be available on Friday at the swim, except those that are swimming in Spokane. Those swimming in Spokane or not swimming at all can pick up on race morning (Saturday).

WEBPAGE: <http://www.lcsc.edu/crosscountry/2010funruns.html> many more details about the race can be found here including address for Spokane swim, course, etc...

CONTACT INFO: Mike Collins, 208-792-2308, mcollins@lcsc.edu

Mail Entries to: LCSC XC, C/O Mike Collins, 500 8th AVE, Lewiston, ID 83501. Checks payable to LCSC XC

2010 Snake River Triathlon Entry Form

Choose Category (if after April 4th add \$5 per participant)

___ INDIVIDUAL w/ Shirt	\$40.00	___ 3-Person Team w/ Shirt	\$55.00
___ INDIVIDUAL w/out Shirt	\$30.00	___ 3-Person Team w/out Shirt	\$45.00
___ 2-Person TEAM w/ Shirt	\$45.00	___ Swimming in Spokane	\$5.00
___ 2-Person Team w/out Shirt	\$35.00		

INDIVIDUAL or TEAM ENTRY (Runner)

Name: _____ Age: ____ Gender: ____ Birthday: ____/____/____ Shirt Size: S M L XL
Address: _____ City: _____ State: _____ Zip: _____
Email: _____ Phone: () _____ TriNW#: _____

TEAM ENTRY (2nd Member)

Name: _____ Age: ____ Gender: ____ Shirt Size: S M L XL
Address: _____ City: _____ State: _____ Zip: _____

TEAM ENTRY (3rd Member)

Name: _____ Age: ____ Gender: ____ Shirt Size: S M L XL
Address: _____ City: _____ State: _____ Zip: _____

PLEASE READ BELOW AND SIGN BEFORE SUBMITTING.

I know that competing in a triathlon is a potentially hazardous activity. I should not enter and compete unless I am medically able and properly trained. I assume all risks associated with competing in this event, including, but not limited to falls, contact with other participants, the effects of weather, traffic, interactions with non-participants and the conditions of the road all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of the acceptance of my entry, I, myself and anyone entitled to act on my behalf, waive and release any and all sponsors and organizers, their officers, agents and assigns, the race director and volunteers from all claims or liabilities of any kind arising out of my participation in this event even though that liability may arise out of the negligence or carelessness on the part of the persons named in this waiver. **I also understand that my entry fee is non-refundable and non-transferable.** A parent must sign if the child is under 18 years of age. This certifies that the child has permission to participate and agrees to the waiver.

ACTS OF GOD & OTHERS: Although it is not anticipated that weather, road construction, etc.. will affect the race. The race organizers reserve the right to adjust the course, the time of the race and anything other compensations necessary due to factors beyond their control which includes, but is not limited to weather, road construction, ... We will make every effort to conduct the race to the best of our ability with the safety of all participants and volunteers in mind.

SIGNATURE: _____ Date: _____

SIGNATURE: _____ Date: _____

SIGNATURE: _____ Date: _____

Parent if entrant is under age of 18)

