

Built By Geoff Women's Tri Entry Form

DECLARATION

WARNING: This is a legal document that affects your rights.

MUST be signed by ALL competitors.

I agree to compete in the Kalgoorlie Tri Club events on the following basis:

1. I acknowledge that competitive triathlon involves the real risk of serious injury or even death from various causes, including over-exertion, equipment failure, dehydration, accidents with other competitors or spectators, other road users, course conditions, etc.
2. I understand that I should not compete in this event unless I have trained appropriately and a medical practitioner has verified my medical condition.
3. By competing, I accept all risks necessarily flowing from my participation which could result in loss of life or permanent injury. Accordingly, I release all people associated with the conduct of the event from, and will indemnify them against, all liability (including liability for their negligence) for all injury, loss or damage out of or connected with my participation in this event. For clarification, the people released include event organisers, promoters, sponsors, managers, Triathlon Australia, Triathlon Western Australia and all of their respective directors, officers, employees, agents, contractors, and volunteers including event medical and paramedical personnel. This release and indemnity continues forever and binds my heirs, executors, personal representatives and assigns.
4. I consent to receiving medical treatment that the event organisers think desirable during or after the event.
5. I consent to event organisers using my name, image or likeness, before, during and after the event, for promotional broadcasting or reporting purposes in any media.
6. I understand that compulsory insurance cover effected for participants in this event may not cover me for all injury, loss or damage sustained by me.
7. I understand that safety precautions undertaken by organisers are a service to me and other competitors but are not a guarantee of safety.
8. That I am fully responsible for the security of my personal possessions at the event.
9. That my registration is not transferable to other people. If I am unable to compete or the event is cancelled, my registration fee is non-refundable.
10. That I have listed below any medical condition from which I suffer that might affect my performance or be relevant if medical treatment is needed.
11. That I agree to abide by all race rules and direction issued by the event organiser or race official.
12. I CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER AND HAVE READ THIS DOCUMENT AND FULLY UNDERSTAND IT.

I AGREE to the conditions above by signing below:

Signature:.....

Date:.....

If you have not participated in physical activity in recent months we recommend you have a medical check-up prior to commencing the course.

If you have any medical condition that may affect your ability to participate it is essential for yourself to fill out the Medical register located below.

MEDICAL REGISTER

Please fill out the register below to ensure all possible action can be taken in case of medical treatment or medical emergency.

1. Do you have any current medical problems or conditions for which a doctor is treating you for? (*X One Box Only*)

YES NO

2. If YES please provide details:

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.....
.....

3. Are you currently on any prescribed or counter medication? (*X One Box Only*)

YES NO

4. If YES please provide details:

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.....

5. Are you allergic to any prescribed or counter medication? (*X One Box Only*)

YES NO

6. If YES please provide details:

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.....

7. Have you been treated by a physician for any significant medical condition/problem excluding routine matters such as colds, flu etc. in the past 12 months? (*X One Box Only*)

YES NO

8. If YES please provide details:

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2011 REGISTRATION FORM

Surname:

First Name:.....

Date of Birth: Age:.....

Address:

.....P/C:.....

Phone: (AH).....

Email:.....

Oasis Member Number:.....

T-Shirt (*x one box only*) XS S M L
 XL

Will this be your first triathlon?

YES NO

Will you be attending the nutrition seminars?

YES NO

Are you interested in a free weekly cycling class at the Oasis?

YES NO

Are you interested in a free weekly stretching/strength class at the Oasis?

YES NO

COST = \$80.00

INCLUDES: Event entry, training sessions, t-shirt, running cap and women's health seminar. PLUS BONUS participants pack!

REGISTRATION DAYS

HELD AT GOLDFIELDS OASIS

Saturday 20th AUGUST: 3PM – 5PM (1st timers)

Sunday 28th AUGUST: 10AM – 12NOON