



# WAITLIST APPLICATION

**SATURDAY, SEPT. 24, 2011 • 9:00am • .5mi Swim, 13.1mi Bike, 3.1mi Run**

[www.duxburybeachtriathlon.com](http://www.duxburybeachtriathlon.com)

### RACE INFORMATION

The Duxbury Beach Triathlon will benefit the Duxbury D.A.R.E. program and multiple area volunteer groups (please contact the race director if your group can help). In addition, through the Charity Entry program, donations will be made to Mass. Special Olympics, Parent Project Muscular Dystrophy and Thoroughbred Retirement Foundation. Race is limited to 750 individuals and 50 2-3 person relay teams. Please check the website for more information regarding the refund policy. There is no rain date.

### PACKET PICK-UP/REGISTRATION

Athletes are encouraged to pick up race packets on Friday, September 23, from 3-7pm at the Kingsbury Club & Spa

([www.kingsburyclub.com](http://www.kingsburyclub.com)). Registration is also available on race day, 6:30-8:30am, at Duxbury Beach. Bike racking race day only at 6:30am

### REFUNDS

NO REFUNDS unless purchasing Refund Insurance (RI)\*, 10% of entry fee (\$7.70). With RI, a full refund will be issued through September 10. USAT fees will also be refunded. You must notify race director by September 10. Relay teams are NOT eligible for RI. Transfers for both individuals and relay teams upon request to race director.

### RACE COURSE

The Duxbury Beach Triathlon is a .5 mile swim, 13.1 mile

bike, and a 3.1 mile run through the scenic backdrop of historic Duxbury, Massachusetts—one of the most beautiful courses you will see all year! The swim takes place in Duxbury Bay (water temperature approx. 68° F), the bike course is flat-rolling, and the run is mostly flat. See website for additional details.

### AWARDS

Team Psycho sponsored cash prizes of \$300, \$180 and \$120 will be presented to the top three overall male and female winners; merchandise prizes to male and female age group winners; medals to top 3 age group finishers.



## OFFICIAL 2011 DUXBURY BEACH TRIATHLON WAITLIST ENTRY FORM (please print clearly)

- Waitlist Entry Rules:**
- Entries are available for individuals only.
  - Entries must be mailed and will be entered in the order received.
  - Entries will be held until September 10.
  - Check must accompany entry or entry will be returned.
  - All entries not accepted will receive full refund.
  - No race day entries allowed.

T-shirt size (check one): <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL	<input type="checkbox"/> Male elite <input type="checkbox"/> Male age group 13+ <input type="checkbox"/> Clydesdale (M) 200+	<input type="checkbox"/> Female elite <input type="checkbox"/> Female age group 13+ <input type="checkbox"/> Athena (F) 160+	Inlet Division (Police): <input type="checkbox"/> Male <input type="checkbox"/> Female
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Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age on 12/31/11 \_\_\_\_\_

Email (please print clearly) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Cell Phone \_\_\_\_\_

USAT License # \_\_\_\_\_ Exp. Date \_\_\_\_\_  I will be using a 1-day only license (\$10 adult/\$5 youth (13-17))

Category	Fee	Amount Enclosed
Entry Fee	\$77	
USAT 1-Day \$10 License Fees	Adults \$10/person; Youth (13-17) \$5/person	
	TOTAL	

Make checks payable to  
Duxbury Beach Triathlon; mail  
completed application with payment to:  
Duxbury Beach Triathlon  
P.O. Box 2651  
Duxbury, MA 02331-2651

READ CAREFULLY BEFORE SIGNING THIS ACKNOWLEDGEMENT, WAIVER AND RELEASE FROM LIABILITY (AWRL). I certify that I am physically fit and have not been advised against participation by a health professional and I assume the risks of participation in this multi-sport event. I release and discharge the following entities from any and all claims of damages of any kind which may result from my participation in the 2009 Duxbury Beach Triathlon: USAT, event sponsors, race directors, event producers, volunteers and the Town of Duxbury. I certify that I am 18 years of age or older and I have read this document and understand its content.

Printed Name \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

For persons under 18, a parent/legal guardian must sign the above AWRL and read below.

I, the undersigned \_\_\_\_\_ (parent/legal guardian) of the minor have executed the foregoing AWRL on behalf of the minor named herein. I represent that I have legal authority to act for and on behalf of the minor name(s) herein, and I agree to hold harmless the persons or entities mentioned in the foregoing AWRL for any claims against them. I authorize any licensed physician, EMT, hospital or other medical care facility to treat the minor(s) for any injuries that may arise during this USAT sanctioned event. I authorize any such medical provider to perform all procedures deemed medically advisable.

Printed name of Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_ Relationship \_\_\_\_\_