

North York Aquatic Club Triathlon Team 2010 Registration

Name: _____ D.O.B.: _____ Gender: _____

Address: _____ Postal Code: _____

Phone # home: _____, work: _____, cell: _____

Parent's names _____, _____

Email (list all where you would like info sent) _____

Athlete age categories are in two year groupings based on the age obtained during 2010. Please check the age your child will be on December 31, 2010.

6, 7 _____ 8, 9 _____ 10, 11 _____ 12, 13 _____ 14, 15 _____

Please indicate the clinic(s) you will attend:

Introduction to Triathlon Clinic, 10 and under May 29 _____

Introduction to Triathlon Clinic, 11 and over May 29 _____

Advanced Triathlon Training Clinic in Collingwood, July 6-8 (\$275) _____

Please indicate shirt size, child XS-XL and adult XS-M _____

Membership Fees Options:

- 1. NYACTT Membership (no clinics) – See you at some or all of the races: \$55**
(Includes Ontario Association of Triathletes (OAT) membership fee, OAT Insurance Package, and shirt)
- 2. May 29th Clinic Registration: \$75**
(Includes Ontario Association of Triathletes (OAT) membership fee, OAT Insurance Package, shirt and clinic)
- 3. Collingwood Training Clinic: \$275 plus either NYACTT membership or May 29th Clinic Registration.**

All cheques to be payable to North York Aquatic Club, \$15 charge for NSF cheques)

Waiver

In consideration of the acceptance of my application for registration as a member of the North York Aquatic Club Triathlon Team (NYACTT) for the Triathlon season, I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the NYACTT and its respective coaches, agents, officials, employees, contractors, representatives, successors and assigns of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect of death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my registration as a member of the NYACTT or my participation in any NYACTT sponsored

and/or sanctioned event in the 2010 Triathlon Season, whether prior to, during or subsequent to any such event AND NOTWITHSTANDING that same may have been contributed to or occasioned by the NEGLIGENCE of any of the aforesaid. **IF THIS WAIVER IS ALTERED THE REGISTRATION WILL BE REJECTED.**

PLEASE NOTE:

*This form must be signed by **both** the applicant **and** a legal guardian.

*Upon acceptance as a member of the NYACTT the applicant agrees to abide by the rules and procedures of the North York Aquatic Club Triathlon Team and the Ontario Association of Triathletes.

*For details of insurance coverage please consult the club.

APPLICANT'S SIGNATURE

LEGAL GUARDIAN SIGNATURE

NYACTT membership expires December 31, 2010.

OFFICE USE ONLY

Date Received: _____

Registration Fee Received: _____

Ontario Association of Triathletes membership # _____