

Ways to Register:

By Mail, complete the registration form and send it with your payment to Killam Recreation Board, Box 189, Killam, AB T0B 2L0

In Person at the Town of Killam or the Town of Sedgewick Office

Or at <http://flagstaff.ab.ca/county-services/recreation-and-culture> find the form under Rec. Programming

Volunteers Needed:

Interested Volunteers should contact the Town of Killam or the Town of Sedgewick

Race Day Registration:

9:00 am

First Heat:

10:00 am (heats run 30 min apart)

@ the Killam Agriplex!

5175-51 Avenue



Registration Fees

Must be 15 years old to compete

Early Bird Fees (until May 1)

Individual	\$30.00
Team (2 members)	\$50.00
Team (3 members)	\$60.00

May 2-May 16

Individual	\$40.00
Team (2 members)	\$60.00
Team (3 members)	\$70.00

Entry fees are non-refundable or transferable.

Group Entries are submitted together with payment.

Race Day Package Pickup:

Thursday, May 29 , 10:30-1pm

Friday, May 30, 3:30-6pm

Or race day at the Killam Agriplex

Not sure if you want to TRY it alone?

A team consists of 2 or 3 participants with each member completing a leg of the race.



Flagstaff Communities

Try-It Triathlon

Saturday, May 31, 2014

300 metre Swim

10 km Bike

3.5 km Run

Registration Form

Name

Address

Phone

E-mail

Age on Race Day

Gender: Male Female

Tid-bit about you or your team that could be announced as you cross the finish line?

Payment Received:

*** Note: Cheques made payable to Killam Recreation Board**

Participation Waiver:

In consideration of your acceptance of this race entry; I for myself, my heirs, executors, administrators, assign and forever waive, release and discharge any and all rights,

demands, claims for damages and clauses of suit or action known or unknown, that I may have against the County of Flagstaff, Town of Killam, Town of Sedgewick, Killam Recreation Board or the Tri-it Triathlon for Flagstaff County Organizing committee, Her Majesty in Right of Canada, and any and all

participating race sponsors, supporters and directors, officers, employees and agents of such parties, for any and all injuries in any manner involved in this race, that I assume those risks, that I will assume and pay my own medical and emergency expenses in the event of an accident, illness or other

capacity, regardless of whether I have authorized such expenses and that I am physically fit and sufficiently trained to

participate in the race. I understand that at this event I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assigns.

I hereby certify that I have read this document and I understand its content.

Signature

(Parent or Guardian must sign for participants under 18 years of age.)

More Information Contact:

Charlene Jackson at the Town of Killam at 780-385-3977



Lindsay Dallyn at the Town of Sedgewick at 780-384-3504



Kate Richards at Flagstaff County at 780-384-4151

