

# MCLEAN KIDS Triathlon Registration Form

## *Proceeds to Benefit McLean Volunteer Fire Department*

To register for the race, please go to <http://www.signupgenius.com/go/10c0c45afa629a2fe3-20151> to sign up and pay the \$30 registration fee. In order to enter the race, please read and sign the attached entry form and waiver. Incomplete forms will not be accepted. Print out, complete and sign form and bring with you the day of the race.

\_\_\_\_\_  
**Participant** First Name Last Name

\_\_\_\_\_  
**Guardian** First Name Last Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip (\_\_\_\_\_)\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Birth Date Age on race day M F  
Gender

\_\_\_\_\_  
Medical problem/allergies:

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### Registration Fees:

Please check one of the following events.

\_\_\_ Age 5-7yrs (Duathlon – Swim & Run) \$30 Each Participant \_\_\_

\_\_\_ Age 8-10yrs Triathlon

\_\_\_ Age 11 & 12yrs Triathlon

Number of Participants \_\_\_

**Total Enclosed** \_\_\_\_\_

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## Waiver Form

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I declare that I am over the age of 18 and am the parent/legal guardian of \_\_\_\_\_, a minor age \_\_\_\_\_. I hereby acknowledge and agree on behalf of myself and my child, that participation in the 2015 McLean Kids Triathlon competition (the "**Event**") carries with it its own degree of risk and potential hazard. I understand that vehicular traffic and pedestrians will be using the same roadways during the Event. I assume, on behalf of myself and my child, all risks associated with the event, including, but not limited to, falls, potential collisions with other participants, vehicles and/or obstacles, the effects of road and traffic on the course, weather (including severe heat) and drowning, any of which could result in serious injury or even death to the participant, all such risks being known and appreciated by me. In consideration of the acceptance of this entry, I, , intending to be legally bound, do hereby agree on behalf of myself and my child, to, waive, release and forever discharge any and all rights and/or claims that I or my child may have against the Fairfax County and the Fairfax County Government, Vera Aquatics LLC, the Event, and any and all of its sponsors, promoters, volunteers and/or its or their officers, agents, representatives or assigns, for any and all loss and/or liability that may arise in connection my child's participation in the Event and I hereby agree to indemnify and hold harmless any and all of the foregoing in connection therewith, even though that liability may arise from the negligence or carelessness on the part of the persons named in the foregoing waiver.

In the event of the need for medical attention, I authorize the Event officials to use their discretion to have my child transported to a medical facility and administer medical aid and I, on behalf of my child, will take full responsibility for any such action. I hereby attest and verify that my child is physically fit and that my child has been evaluated by a licensed medical practitioner and has been determined to be sufficiently physically fit to participate in the Event. I agree and understand that in the event of a cancellation of the Event due to a storm, rain, inclement weather, winds, other "Acts of God" conditions, acts of the county, public officials or other third parties, or other actions outside of the control of the promoters of the Event, my enrollment fee shall be non-refundable. I have been provided with and have read and agree to abide by the Event rules and regulations.

### *Please initial the following items:*

- \_\_\_\_\_ No Rain Date; No Refund
- \_\_\_\_\_ My child can swim (unassisted by any person or flotation device) at least one length (25 meters) of a pool.
- \_\_\_\_\_ There will be a chaperon (at least 18yrs. of age) present before, during, and after the race to supervise my child.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

I DO NOT give permission for photos/video of my child