



Ballwin 2010 Kids Triathlon



Sunday, September 26, 2010 @ 8 a.m. @ The Pointe at Ballwin Commons

Age Groups: 5-6, 7-8, 9-10, 11-12 (Field limited to 200)

The top three male and female overall and top three male and females finishers in each age group will receive awards. All participants will receive a t-shirt & a participation medal.

Registration: \$20 per entry. There will be no race day registration. Visit www.ballwin.mo.us for on-line registration. Or entries forms can be dropped off or mailed to The Pointe At Ballwin Commons, Attn: Jules McCormick, #1 Ballwin Commons Circle, Ballwin, MO 63021. Entry forms and \$20 must be received by (not posted marked by) September 17.

Please make checks payable to "City of Ballwin"

** A confirmation letter will be sent **by e-mail** confirming your child's entry into the triathlon and important instructions the week before the event.

Safety: Non-swimmers may complete the swim with the aid of a US coast guard certified life jacket or kickboard. However, athletes using swim aids will not be eligible for podium awards. No performance devices such as fins will be allowed. No training wheels, tricycles or scooters are allowed. All participants must wear a helmet during the biking portion.

Timing: Total time will be kept with no splits. Timing by:



Entry Form

Name _____

Email Address _____ DOB _____ Gender (M/F) _____

Street Address _____ City _____

State _____ Zip _____ Phone # _____

How did you hear about this race? _____

T-Shirt Size (circle one): Child Med Child Lg Adult Sm Adult Med Adult Lg

My family and I hereby waive and release the City of Ballwin, The Pointe at Ballwin Commons, their representatives, successors and assign from claims and damages and/or injuries incurred while participating in or as a spectator at a City of Ballwin sponsored activity. I have read and understand the registration policies. I attest as a participant or parent of a minor participant and verify that I am physically fit for competition for this race, and my physical condition has been verified by a licensed medical doctor. Registration is not valid without signature. I also agree, as a participant or parent of a minor participant, to grant full permission to the City of Ballwin to use my name/their name, photograph, videotape, or recording for promotional purposes without obligation or liability to my family. A refund request will be granted if written cancellation is received at least two week prior to the race & a \$5 service charge will be assessed. No rain date.

Parent's signature _____ Date _____