

YOUTH TRIATHLON CLINIC

SPENCER FAMILY YMCA / SPENCER RACERS



Saturday, August 10

Cost: \$10/athlete

Grades: 1st – 6th

Time: 9am – 12pm



Location: Spencer Family Aquatic Center

Open to members and program participants!

Registration Deadline: July 20th



2019 Youth Triathlon Clinic

Name: _____

Male Female

REGISTER ONLINE:
Program Code: # 19FF 06122

Mailing Address: _____

Grade Next Year _____

Email Address: _____

Birthdate ___/___/___ Age: _____

Day Phone: _____

Shirt Size (circle one): S M L XL

I knowingly enter the 2019 Youth Triathlon Clinic. I do so at my own risk and personally assume responsibility for any injuries or other damages I may incur as a direct or indirect result of my participation. I further agree that neither my heirs or assignees will hold liable any representative of the Spencer Family YMCA, Spencer Racers or its sponsors as a result of injuries or damages sustained from any participation of any of these events. I further, hereby, certify that I am physically fit to participate in the triathlon clinic for which I am entered on August 10, 2019.

I, the undersigned, do hereby consent and agree that the Spencer Family YMCA, it's employees, or agents have the right to take photographs to use in any and all media, now and hereafter known. Signature (parent if minor).

Signature _____