



# South County

August  
1st

# Beat The Sun Down Tri 2009



*Join us for our 2nd Annual South County Triathlon. We will offer SPRINT, Team SPRINT, 5k, and a CHILDREN's TRI. Something for the whole family. Pick your event and give it your all.*

**5K Fun Run** - 3.1 Mile Run (\$30)

**Sprint Distance** - 5K run, 11.7 mi bike, 400m swim (\$55)

The swim will be in the South County Swimming Pool, Biking will be relatively flat around the Riverton Community, 5K run will also be around the Riverton Community. (Specific Routes will be posted by July 10th)  
Age and Gender Divisions

**Team Sprint** - Same as above but may register as a team of two or three. There will be only ONE Team Division. (\$100/Team)

**Children Tri** - 100m swim, 4.3 bike, and 1 mi run. (\$35)

Must be under the age of 16. Similar route to Sprint but with shorter distance and earlier turn-a-round on the course. (Specific Route will be posted by July 10th) Children Tri will be broken down into age divisions TBD by registration numbers. Parents are allowed in Transition Area.

**\*\* Register before July 1st and save \$10, Register before July 20th and save \$5\*\***



**LOTS OF POST-RACE FUN!!!  
INCLUDING AWARDS, RAFFLES, and POOL PARTY!!!!**

**REGISTRATION DEADLINE: Sunday, July 26th, Midnight**

Register @ Marv Jenson, South County Pool, or online @ [activityreg.com](http://activityreg.com)

Packet Pick-up: Friday, July 31st 12pm to 8pm @ South County Swimming Pool

Check-in/Body Marking: 5:00pm to 6:00pm

Pre-Race Meeting (for ALL events): 5:45pm

Event Schedule: Children's Race @ 6:00pm followed by adult 5K and Triathlon @ 7pm

Post-Race Party: Awards, Raffles, and Open Plunge for Participants and their families.

**FOR MORE INFORMATION LOG ONTO:  
[www.recreation.slco.org/marvjenson](http://www.recreation.slco.org/marvjenson)**



# South County Beat the Sun Down Tri

**DIVISION (please check one)**

**\*\*Register Early and SAVE \$\$\$.** Register Before July 1st \$10 off.

5K FUN RUN (\$30) \_\_\_\_\_

Individual Sprint (\$55) \_\_\_\_\_

Children Tri (\$35) \_\_\_\_\_

TEAM Sprint (\$100)\* \_\_\_\_\_

Team Name \_\_\_\_\_

Age \_\_\_\_\_

Male \_\_\_\_\_

Female \_\_\_\_\_

Shirt Size \_\_\_\_\_

\*Please have each team member fill out a registration form and turn all forms in together with payment.

## PLEASE PRINT

Participant's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

E-Mail \_\_\_\_\_

(\*Must List - This will be our contact for more information / weather related issues)

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

In Emergency, Notify \_\_\_\_\_

Emergency Phone \_\_\_\_\_ Emergency Cell \_\_\_\_\_

### **Participant Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy**

**Release & Indemnification:** I hereby recognize and acknowledge that my child's participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child being permitted to participate in such events, I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly indemnify and hold harmless, defend, release, waive, and discharge Salt Lake County, and its officers, employees, and volunteers from any and all suits, claims or liability including negligence, based on any injury except that caused solely by the willful misconduct of Salt Lake County, that may result from my child's participation in Salt Lake County Parks & Recreation activities. In addition, I agree that I or my insurance will pay for medical, hospitalization or any other expenses resulting from my child's participation.

**Refund:** As per Salt lake County policy and procedures, the Parks & Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. All refunds must be requested in person, accompanied with a written refund request. No refunds shall be given after the first day of the program.

**Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred to the Salt Lake County Attorney's Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake County Attorney for collection.

**Emergency Treatment:** I hereby authorize Salt Lake County Parks & Recreation program staff to act on my behalf in accordance with their best judgement in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical, or otherwise, that may arise therefrom. I understand that I or my insurance company will be billed for such emergency treatment.

**Equal Opportunity:** Salt Lake County Parks & Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will, upon request, provide reasonable accommodations to individuals with disabilities.

**Understanding:** By signing this assumption of risk, liability release, indemnification, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure and that I agree to its terms.

\_\_\_\_\_  
Signature (Participant or Legal Guardian if under age)

\_\_\_\_\_  
Date