



ENDURE ULTRA TRIATHLON

ATHLETE RACE RESUME

24+ Hour Race Experience

Please list all endurance events of 24 hours or longer that you have completed.

#	Race Name / Event	Race Type (Tri, Ultra, Other)	Date Completed (MM/YYYY)	Finishing Time (HH:MM:SS)	Finish Status
1					☐ Finisher ☐ DNF
2					☐ Finisher ☐ DNF
3					☐ Finisher ☐ DNF
4					☐ Finisher ☐ DNF
5					☐ Finisher ☐ DNF

****Please send a photo to matt@endureultratriathlon.com for the website athlete page. ****

I certify that all information provided on this Athlete Race Resume is accurate and complete. I understand that misrepresentation of race experience may result in disqualification from the Endure Ultra Triathlon.

Athlete Full Name (Print): _____

Date: _____

Athlete Signature: _____