STEP OUTDOORS TRYATHLON & 5K TRAIL RUN/WALK

| September 16, 2023 | **No categories, all participants who finish will be recogn | ized!* |
|---|--|------------|
| TRYATHLON REGISTRATION (TEAM) | Name: | |
| | Address: | |
| Runner's Name: E | Email: | |
| Address: F | Phone: Age:0n 9/16/23 | _ |
| · · · · · · · · · · · · · · · · · · · | T-shirt size: S M L XL XXL (Must register by 8/31) | |
| Email:* | *Signature: Sign & Date | |
| Phone: Age: On 9/16/23 | *or parental signature if registrant is under 18 years of ag | <i>s</i> e |
| T-shirt size: S M L XL XXL (Must register by 8/31) *Signature: Sign and Date | Emergency Contact: (name & #) | |
| *or parental signature if registrant is under 18 years of age | 5K REGISTRATION | |
| Emergency Contact: (name & #) | **No categories, all participants who finish will be recogn | ized!* |
| Paddler's Name: | | |
| Address: | Name: | |
| | Address: | <u> </u> |
| Email: | | |
| Phone: Δσe: On 9/16/23 | Email: | 2 |
| T-shirt size: S M L XL XXL (Must register by 8/31) | Phone: Age: On 9/16/23 | |
| *Signature: Sign and Date | T-shirt size: S M L XL XXL (Must register by 8/31) | |
| *or parental signature if registrant is under 18 years of age | *Signature: Sign & Date | |
| Emergency Contact: (name & #) | *or parental signature if registrant is under 18 years of ag | ;e |
| | Emergency Contact: (name & #) | |
| Biker's Name: | | |
| Address: | PAYMENT INFORMATION | |
| Email: | FEES ON PAPER* ONLINE BY SEPT. 13* | |
| Phone: Age: On 9/16/23 | | - |
| T-shirt size: S M L XL XXL (Must register by 8/31) | 5K Walk/Run \$25 \$25** | |
| *Signature: Sign and Date | TRY (SOLO) \$30 \$30** | |
| *or parental signature if registrant is under 18 years of age | TRY (TEAM) \$60 \$60** | |
| Emergency Contact: (name & #) | **PLUS PROCESSING FEE | |

*LIABILITY WAIVER, PHOTO RELEASE, PERMISSION FOR POSTING RESULTS

By signing this form, I acknowledge my understanding of the inherent risks associated with participating in the Step Outdoors Tryathlon and 5K Trail Run/Walk event. I understand risk may vary depending upon personal fitness level, weather conditions and other unforeseen circumstances. I acknowledge having a fitness level capable of participating, accept personal responsibility for my participation, and release the organizing parties of liability should a personal injury occur during the course of the activity. In addition, I give permission for photos to be taken during the event and posted in public forums such as the Step Outdoors website, social media, newspapers, posters, and advertising media. I also give permission for my name to be included in the race results which may appear at the aforementioned media locations. Permission will be assumed unless otherwise stated in writing and presented to the registration tent the day of the event. The signature of a parent/legal guardian of a participating minor indicates acknowledgement, understanding, and agreement on behalf of the minor.

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*Guaranteed t-shirt if registered by Aug. 31 (additional shirts may be available)

TRYATHLON REGISTRATION (SOLO)

REGISTER ONLINE: WWW.STEPOUTDOORS.ORG Or complete form & submit with payment to: WELLSBORO PARKS & REC, ATTN: TRYATHLON 14 Crafton Street, Wellsboro, PA 16901 CHECKS PAYABLE TO: STEP OUTDOORS TRYATHLON