

- Athletes must start at swim times indicated on wave assignment, no exceptions.
- Report to swim official 15 minutes prior to wave start.
- Athletes may use any stroke in the swim portion of the race.
- Each team member will participate in one event.
- 9-12 year olds will use recumbent bikes.
- 9-15 year olds must have an equipment orientation prior to start.
- 9 year olds and up may train in the Wellness Center 1 month prior

Questions/Comments Contact

Sue Munz 815-756-9577

OR

smunz@kishymca.org

Brought To You By



1680 MEDITERRANEAN DRIVE SUITE 101
SYCAMORE, ILLINOIS 60178
(815) 899-6061

www.olympicchiropractic.com



Cost: \$24 **Individual Competition**

(see separate form for TEAM competition in this flyer)

Tri Option _____ Bi Option _____

Live**Strong** Option _____

Name: _____

Address: _____

Phone: _____

Cell: _____

Emergency contact name & phone:

Email: _____

Age/D.O.B. (min 9): _____ Sex: M / F

I want to compete with my family or friend: Y/ N

Who: _____

T-Shirt Size: _____

Send completed registration to:

Kishwaukee Family YMCA

2500 W. Bethany Road

Sycamore, IL 60178

Waiver & Release:

I realize that participating in an endurance race is a potentially hazardous event. I hereby testify that I am medically able to swim, bike and run. I assume all risks associated with this event including, the effects of indoor climates, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release any rights and claims for damages I may have incurred against all organizers, the YMCA, sponsors and volunteers.

- I understand and agree to the Waiver and release.



FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

YOU CAN DO IT! Be a part of our 7th Annual Indoor Triathlon....c'mon, give it a "tri!"



**Kishwaukee Family YMCA
7th Annual Indoor Triathlon**

Sunday, February 19, 2012

Registration Deadline: February 13

Race day packet pick-up:

7:30-8:30a.m.

Race starts at 8:00 a.m.

Use this form for Individual, Teams and **LIVESTRONG** wave Registrations!

Race Format

An indoor triathlon is based on distance completed in a fixed, predetermined time. 96 athletes will compete with a maximum of 12 participants in a wave. Athletes compete using the indoor pool, stationary cycles, and treadmills. **New this year, a Biathlon (Run/Bike only) option available and LiveStrong Wave** (Compete in honor of someone or survivors can do a walk or bike only option). Please check preference in the registration section.

Swim: 10 Minutes

- ◆ Swim any type of stroke
- ◆ Lanes will be shared by 2 participants
- ◆ Distance will be measured to nearest half-length

Transition 1: 10 minutes to shower/change. Lockers will be provided; you supply the lock/towel.

Bike: 20 Minutes

- ◆ Star Trac/Lifetime Fitness bikes provided
- ◆ Exact distance ridden is recorded

Transition 2: 5 Minutes

Run: 15 Minutes

- ◆ Run on Lifetime Fitness Treadmill at 1% grade
- ◆ Exact distance ridden is recorded

Awards

An awards ceremony will be held in the lobby at 1:30 p.m.

T-Shirts and complementary goodie bags will be given to all participants.

Medals for 1st, 2nd and 3rd place will be given to the overall male and female performers and to the top finishers of each age group:

- ◆ 9-12
- ◆ (13-17) (18-24)
- ◆ (25-29) (30-34) (35-39)
- ◆ (40-44) (45-49) (50-54) (55-60)
- ◆ (61 & Up)

- Top performing males and females will also receive 2 FREE personal training sessions courtesy of the YMCA

Teams may also be formed so you can choose your events and compete with friends. 2-3 athletes/team

Cost: \$36 for **TEAM Competition**

Swimmer: _____

Address: _____

Age/D.O.B. (min 9): _____ Sex: M / F

Email: _____

T-Shirt Size: _____

Biker: _____

Address: _____

Age/D.O.B. (min 9): _____ Sex: M / F

Email: _____

T-shirt: _____

Runner: _____

Address: _____

Age/D.O.B. (min 9): _____ Sex: M / F

Email: _____

T-Shirt size: _____

I want to compete with my family or friends:

Name: _____

Send completed Registration to:
Kishwaukee Family YMCA
2500 W. Bethany Road Sycamore, IL
60178

Waiver & Release: (Each Teammate Must Sign)

I realize that participating in an endurance race is a potentially hazardous event. I hereby testify that I am medically able to swim, bike and run. I assume all risks associated with this event including the effects of indoor climates, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release any rights and claims for damages I may have incurred against all organizers, the YMCA, sponsors and volunteers.

- I understand and agree to the Waiver and release.
- All participants, please sign below:
