

MAC 3rd Annual Mini-Triathlon

swim • bike • run



August 4th, 2012

General Information

DATE:

Saturday, August 4, 2012
Registration 6:30 - 7:30 am
Race begins at 7:30 am

REGISTRATION:

Registration will be accepted by mail or in person at the Meade Activity Center office or KORT Brandenburg Physical Therapy

REGISTRATION FEES:

\$40 per individual participant
\$60 per team
Add \$15 for late registration

REGISTRATION DEADLINE:

Wednesday, July 25, 2012 at 2:00 pm

For more information contact:

Meade Activity Center office at 270-422-2227 or KORT Brandenburg Physical Therapy at 270-422-3775 or e-mail us at info@meadeactivitycenter.org

MAKE CHECK PAYABLE TO:

Meade Activity Center or MAC

REGISTRATION ADDRESSES:

Meade Activity Center
493 Lawrence Street
Brandenburg, KY 40108
Phone: (270) 422-2227

KORT Brandenburg Physical Therapy
815 Suite C Hillcrest Drive
Brandenburg, KY 40108

Course Description

- The 350 meter SWIM takes place in the Doe Valley Swim and Tennis Club 25-meter outdoor pool.
- The 8 mile BIKE course is out and back with some hills and a few turns.
- The 2.2 mile RUN course is a loop and is slightly hilly.
- There will be water stops along the route.

Awards

Awards will be generated by the population of registered participants. There will be awards for all ages.

Attention!!

DO NOT FORGET TO FILL OUT THE REGISTRATION FORM AND SIGN THE WAIVER BELOW... THIS MUST BE SIGNED IN ORDER FOR YOU TO PARTICIPATE.... THANKS!



Sponsored by:



& Advocates for the MAC

Visit us on the Web: www.meadeactivitycenter.org

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Registration Form

PARTICIPANT 1: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____
CELL PHONE: _____
E-MAIL: _____
BIRTH DATE: _____
GENDER: M or F

COMPETING AS: Individual Team

TEAM NAME: _____

PARTICIPANT 2: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____
CELL PHONE: _____
E-MAIL: _____
BIRTH DATE: _____
GENDER: M or F

PARTICIPANT 3: _____
ADDRESS: _____
CITY/STATE/ZIP: _____
PHONE: _____
CELL PHONE: _____
E-MAIL: _____
BIRTH DATE: _____
GENDER: M or F

Please estimate your overall finish time by choosing one of the following (check one):

Under 50 minutes ___ 60 - 70 minutes ___
50 - 60 minutes ___ Over 70 minutes ___

This is for organizational purposes and does not have to be exact.

Waiver

I, the undersigned participant in the MAC Mini Triathlon 2012, do hereby agree for myself, my heirs, executors, and assigns that, the MAC and any sponsors or employees, shall be released from any and all claims for personal injury or loss or damage to personal property arising from my participation in any an all activities associated with this event. I assume all risks and am aware that I am participating in this event at my own risk.

Team Member 1

Team Member 2 (if applicable)

Team Member 3 (if applicable)

If under 18, parent/guardian signature

T-Shirt Sizes:	small ___
(sizes are Adult)	medium ___
Please Check one or place	large ___
number next to size for	X large ___
more than one participant.	XX large ___

Come & Support

The Meade Activity Center is now offering a variety of programs and activities to promote health and wellness to our local community. The center's mission is to provide fitness and fun for groups of all fitness levels and ages. New offerings include youth sports, adult fitness, swim lessons, camps and after-school programming.

Our future fitness and aquatics center will boast an indoor pool, basketball court, community rooms, fitness and work-out equipment, and most importantly, additional programming, classes, and events for our citizens. Please help support our cause and come out and support us at our Mini-Triathlon event!