

Self-Paced Triathlon

September 9 - October 18, 2019

Workout at your own pace with 40 days to reach your goal!

Divisions Include:

- **Ultra Ironman (Double)** - 5.2 mile swim (187 laps), 52 mile run/walk, 220 mile bike
- **Ironman** - 2.6 mile swim (94 laps), 26 mile run/walk, 110 mile bike
- **Tinman** - 1.5 mile swim (54 laps), 13 mile run/walk, 55 mile bike
- **Olympic** - 1 mile swim (36 laps), 6 mile run/walk, 24 mile bike
- **Sprint** - 750 meter swim (17 laps), 3 mile run/walk, 12 mile bike

\$30
Entry Fee

*1 lap is down and back in the WRCC pool.

Event Description:

- ⇒ Competitors will choose which category they would like to compete in with **40 days** to reach their triathlon goal.
- ⇒ Competitors will be asked to record their results on a daily basis at the West River Community Center.
- ⇒ We will rely completely on the honor system for all competitors when recording their mileage totals.
- ⇒ All competitors that reach their goal by the end of the event will receive a t-shirt.
- ⇒ Mileage may be accumulated indoors or outdoors.

For more information call 701-456-2074.

2019 WRCC Badlands Self-Paced Triathlon Registration Form

Name: _____ Phone: _____

Address: _____ Division: _____

City/State/Zip: _____ Male Female

Email Address: _____

ADULT SHIRT SIZE: Small Medium Large X-Large XX-Large
(sizes based on unisex shirts)

IN CONSIDERATION OF YOUR ACCEPTING THIS ENTRY, I hereby, for myself, my heirs, and administrators, waive and release any and all rights and claims, for damages I may have against the West River Community Center and co-sponsors, their agents, representatives, successors, and assigners for any and all injuries by me at this event. FOR COMPETITORS UNDER THE AGE OF 18: I, the undersigned parent or legal guardian of the competitor, hereby approve and confirm the waiver and release.

Signature: _____ If under 18 parent/guardian signature: _____

Return registration form and payment by 9/9/2019 to:
West River Community Center, 2004 Fairway Street, Dickinson, ND 58601
Make checks payable to WRCC

OFFICE USE ONLY:
PAID: _____ ck# _____ cash _____ cc _____
Receipt # _____
Employee Initials _____ Date _____