



ACCIDENT WAIVER AND RELEASE OF LIABILITY

I acknowledge that the Average Jo Triathlon is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event, lack of hydration, I hereby assume all the risks of participating in this event.

I certify that I am physically fit, have sufficiently trained for participation in the Average Jo Triathlon, and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by event holders, sponsors and organizers in which I may participate and that it will govern my actions and the responsibilities at the Average Jo Triathlon.

In consideration of this application and permitting me to participate in the Average Jo triathlon, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, release and discharge from any and all actions of any kind of any liability for my death, disability, personnel injury, property damage, property theft, or actions of any kind which may hereafter accrue to me or my traveling to and from this event. The following entities or person: Kinship of the Perham Area, City of Perham, Ottertail County, MN DNR, Pickle Events LCC, Their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors event volunteers. (B) Indemnify and hold Harmless the entities of persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of my actions during the Average Jo Triathlon.

I hereby consent to receive medical treatment, which may be deemed advisable in the event of injury, accident and/or illness during the event.

I understand that at this event I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers and/or assigns.

This AWRL shall be construed broadly to provide release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document; and I understand its content.

Signature: _____

Parent/Guardian Signature (if under 18) Date: _____



UNITED COMMUNITY BANK



Perham Memorial Hospital and Home



Kinship

Kinship Of The Perham Area

810 Second Ave. SW • Perham, MN 56573
218-346-7102 • Kinship@Perham.K12.MN.US

SWIM 1/3 mile
BIKE 12 miles
RUN/WALK 4 miles



Saturday, June 27, 2009

8:30 a.m. start
Proceeds benefit the youth of the Perham Area



COURSE DESCRIPTION



SWIM: 1/3 mile swim begins at Paul Miller Park on Little Pine Lake. Water depth is approximately 8 feet deep.

Spectators can view the race from several locations on the Paul Miller Park shoreline.

Life guards will be available and the course will be marked.



BIKE (certified helmets are required): Enjoy a 12 mile bike ride around Little Pine Lake, rural well marked roads with beautiful scenery and rolling hills.



RUN/WALK: The 4 mile run on paved bike trail bringing you back to Paul Miller Park. The course is relatively flat.



AWARDS

Awards ceremony will take place immediately after race. Awards for first three places for males and females in each of the following age groups:

- Age 19 and under
- Age 20-29
- Age 30-39
- Age 40-49
- Age 50-59
- Age 60 and over

Other awards

- First overall male/female
- Last finisher
- Oldest participant individual
- Youngest participant

Medals awarded to the top 2 teams in each relay division.

EVENT SCHEDULE

Saturday, June 27, 2009

- 6:30-8:00am Packet pickup - body marking
- 8:20am Mandatory race meeting
- 8:30am Race starts
- 11:30am Awards at Paul Miller Park
- Concessions available after the event.

LODGING

Contact the Perham Area Chamber of Commerce for a list of hotels and resorts in the area 218-346-7710 or visit www.Perham.com



Average Jo Triathlon

REGISTRATION FORM

Registration Fee After 6/1

Individual..... \$35.00.....\$45.00

Relay Teams (3 Jos-complete 3 entries)... \$90.00.....\$100.00

Team name: _____ Total: _____

I am unable to participate in this event.

However, I wish to forward the enclosed

donation to benefit Kinship. \$ _____

Age 19 and under

Age 20-29

Age 30-39

Age 40-49

Age 50-59

Age 60 and over

Name

Age race day

Date of birth

Gender

Address

Phone

Email

Emergency Contact

SHIRT SIZE: SMALL MEDIUM LARGE

X-LARGE XX-LARGE



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