

THE ROTARY CLUB OF DARLINGTON
present the

INDIVIDUAL ENTRY FORM

DARLINGTON TRIATHLON

At BRANKSOME SCHOOL, DARLINGTON

ON

Sunday 18th MAY 2008

SWIM - 364 yds (400m) CYCLE - 16 miles RUN - 3 miles

(Distances are approximate)



NAME

ADDRESS

CLUB NAME (If any) BTA Membership No.

TEL.NO (Home): MOBILE Tel No:

e-mail

AGE AT 31/4/2008 (all entrants must be over 16 years) MR MRS MISS

T-SHIRT SIZE (please circle) SMALL MEDIUM LARGE X-LARGE

ANY MEDICAL CONDITIONS THE ORGANISERS SHOULD BE AWARE OF?

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PLEASE STATE ESTIMATED SWIM TIME: Minutes

ENTRY FEE: BTA MEMBER £27.00. NON BTA MEMBER £30.00

(This includes a one-day BTA licence, public liability and personal accident insurance during the event).

1. The swim will take place in the school pool and a coloured swimming cap will be supplied on the day and must be worn. The cycle and running routes will start and finish at the school.
PLEASE NOTE: this year the run will take place across country.
2. The race will be run under BTA rules (for details go to www.britishtriathlon.org) and the referee's decision is final. BTA licences must be produced at race registration. There will be a £3.00 penalty for failing to do so.
3. The closing date for entries is 11th May or when the entry limit of 200 is reached. There will be no further correspondence/contact until after that date, unless specifically requested.
4. Completed entry forms and cheques payable to "ROTARY CLUB OF DARLINGTON" must be sent to; D NORMINGTON, 2, PENTLAND GROVE, DARLINGTON, DL3 8BA.
5. Cycle helmets must be worn when cycling
6. The individual race results will be shown on www.northernpulse.org.uk
7. Sponsorship monies are payable to the THE ROTARY CLUB OF DARLINGTON (see enclosed form)
8. Pre/post event publicity may include your name or your team's name and possibly a photograph, if you have any objection to this please tick the box below
9. Please enclose a large Stamped, Addressed Envelope for your race information.

DECLARATION: I declare that as a condition of my entry into the DARLINGTON TRIATHLON, I accept that the referee, organisers and their agents cannot be held responsible for any injury, damage or loss however caused and that I take part in the event fully aware of the risks involved and the degree of fitness required for this event. I also declare that my cycle is in a roadworthy condition. I accept that my personal details given above will be held on a computer database.

SIGNED: DATE:

I do not want to take part in any pre or post event publicity.

I would like you to confirm my entry by telephone or e-mail before May 1st.



NORTHUMBRIAN WATER



Blackett Hart & Pugh



WOODLANDS HOSPITAL



VAUXHALL

Sherwoods



CHEVROLET

*** PLEASE ENCLOSE A LARGE S.A.E. FOR RACE INFORMATION ***

darlingtontriathlon@hotmail.co.uk