



REGISTRATION FORM

Child Name: (Entrant) _____ Event Date: _____
(first) (last)

Address: _____

City: _____ State/Province: _____ Postal/Zip Code: _____

DOB: _____ Telephone: (_____) _____ Fax: (_____) _____

Email: _____ (include country and/or area code with telephone & fax)

Parent Name _____ (first) (last)

Emergency Contact: _____ Phone #: _____ Relationship: _____

Race Distance:

5-6 7-8 9-11 12-14 Gender Male Female Age Group: _____

Race Registration Fees USAT # _____ Club Name or School _____

Check One: Youth T-Shirt Size: SM Med LG XLG

Kids Triathlon \$25.00
Day of Event \$35.00

Total Paid: \$ _____

Cancellations and Refunds: Registration fees will be refunded, less a \$10.00 administration fee, if cancellation is received in writing no later than 15 days before event.

PAYMENT METHOD

Please remit payment by Checks, in U.S. funds payable to: South Valley Endurance. There will be a \$12.00 fee charged on checks returned by the bank due to insufficient funds.

(Please check appropriate box) VISA MasterCard AMX Check or Money Order Cash
Card #: _____ Expiration Date: _____ CIV# _____

Print Cardholder Name: _____ Signature: _____

Please mail or fax completed registration form with payment to: South Valley Endurance
Attn: Race Registrations
18330 Sutter Blvd.
Morgan Hill, CA 95037

Phone: (408)426-0509

FAX: (408)776-1136

Email: info@svendurance.com

Do not email credit card information because security cannot be guaranteed. You may fax or telephone credit card information.

ACCIDENT WAIVER AND RELEASE OF LIABILITY FOR SOUTH VALLEY ENDURANCE, LLC

I acknowledge that this athletic event 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, and lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

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

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

In consideration of my application and permitting me to participate in this event, 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 liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: SOUTH VALLEY BIKE AND RUN CLUB, LLC.

Their directors, officers, employees, volunteers, representatives, and agents, the even holders, event sponsors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether cause by the negligence of releases or otherwise.

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

I understand that at this event or related activities, 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 assigns.

I hereby certify that I have read this document; and, I understand it's content.

Print Participant's Name Age Parent Signature Date