

IRON DOLPHIN TRIATHLON

May 15th



Sponsored by:



Finisher Medal for each participant.

Swag Bags & T-shirts for first 100 registered.

Free Childcare provided onsite for children aged 2 1/2 and older.

Registration ends May 14th, no-day of registration. Each race will be capped.

Race timing & splits provided by Back 40 Events.

Name: _____

Address: _____ Town: _____ State: _____

Email: _____ Phone: _____

Estimated swim time for race for seeding purposes: _____ Childcare needed for _____ kids
#

Age: _____ DOB: _____ Sex: M F T-shirt Size: ___ YM ___ YL ___ S ___ M ___ L ___ XL

Please circle race you will participate in (race size and Ind or Team). For team please fill out 1 form,
each participant will sign waiver at check-in. Put # of each size shirt needed for team (3 max).

Swim	Bike	Run	Age	Individual	Team	Race begins
Max	525 yard	20K	5K	15 & over	\$75	\$105
Midi	250 yard	10K	2.5K	any age	\$55	\$84
Mini	100 yard	4K	1K	12 & under	\$35	NA

Family Special: For immediate family of 3 or more participating in individual events, 1st person
pays full, \$10 off each additional. Each participant must fill out registration form.

Race Waiver: I know that running a road race is potentially hazardous activity, which could cause injury or death. I will not enter and participate unless I am medically able and properly trained, and by my signature, I certify that I am medically able to perform this event, and am in good health, and I am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I attest that I have read the rules of the race and agree to abide by them. I assume all risks associated with running in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road, all such risks being known and appreciated by me. I will abide by all race rules. Having read this waiver and knowing these facts and inconsideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Down East Family YMCA, the city of Ellsworth, and all event sponsors, their representatives and successors from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the persons named in this waiver. I grant permission to all of the foregoing to use my photographs, motion pictures, recordings or any other record of this event for any legitimate purpose.

Signature of participant or legal guardian

Date

Checks to be made out to DEFYMC

Down East Family YMCA 238 State St Ellsworth, ME 04605 (207)667-3086 defymca.org