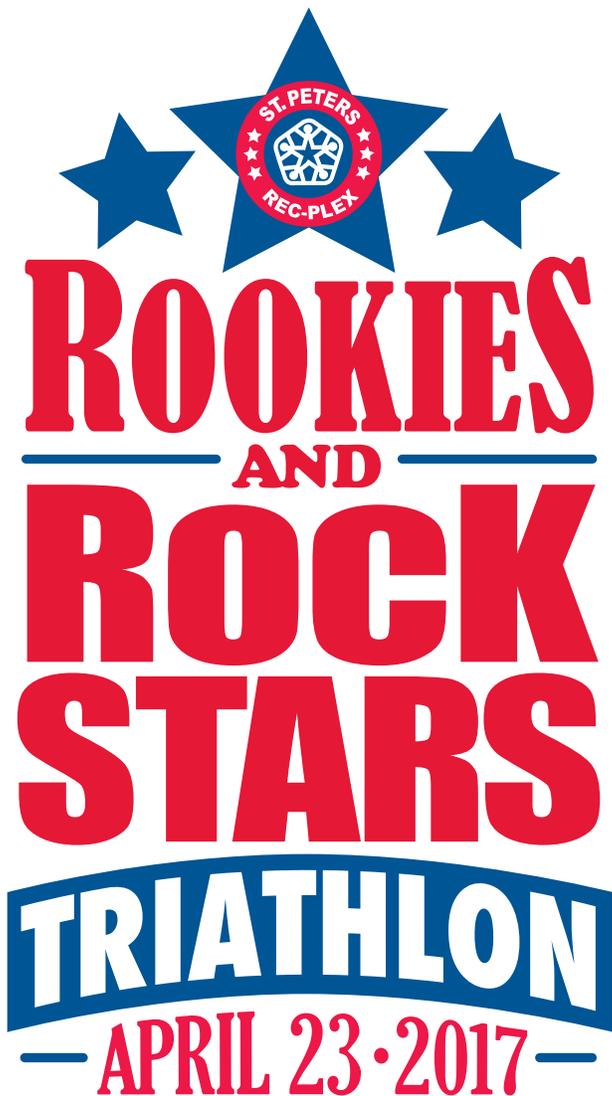


ROCK into SPRING!

2017 SPRING INDIVIDUAL (AGE GROUP DIV.) REGISTRATION FORM



ROOKIES BECOME ROCK STARS ROCK STARS BECOME LEGENDS AT THE ST. PETERS REC-PLEX!

Sunday, April 23, 2017 • Starts at 6:30 a.m.
St. Peters Rec-Plex, 5200 Mexico Road, St. Peters, MO 63376

SWIM 400 meters* (Olympic-quality Natatorium)
BIKE 15.8 miles** (flat farmlands)
RUN 3.1 miles (paved trails, shady parks)

AWARDS: Overall Male and Female; Overall Age Group Division Awards for the Top 3 finishers in these age groups: 14-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, 70-74, 75-79, 80+

ENTRY FEES: \$55 per person through Feb. 15; \$60 from Feb. 16-April 1; \$68 from April 2-21; \$73 on April 22 - 23

REGISTRATION: Register at the St. Peters Rec-Plex, by mail using the form below, or online at www.stpetersmo.net/rec-connect. No online registration after April 20. NO TELEPHONE REGISTRATIONS and NO REFUNDS.

PACKETS: Packet pickup details will be announced. Check online at www.stpetersmo.net/triathlon for the latest information, including course maps and swim send-off times. NO PHONE CALLS.

POST-RACE: Complimentary food and fruit for participants.

**SWIM TIMES: Expect 10-second intervals between send-off times for swimmers. Swim times are assigned by approximate 400M swim time. Teams will not start first.*
***Bicycle times will not be adjusted for train stoppages.*

ROOKIES & ROCK STARS TRIATHLON St. Peters Rec-Plex, April 23, 2017 - Age Group Division Entry Form

Make checks payable to: City of St. Peters
Mail to: City of St. Peters, Attn: Rick Oloteo, P.O. Box 9, St. Peters, MO 63376

Name: _____
Address: _____
Email address: _____
Date of Birth: _____
Your approximate 400M swim time: _____

Phone (evening): _____
City: _____ Zip: _____
Emergency Contact: _____ Phone: _____
Age on Race Day: _____
Circle One: Male Female Circle T-Shirt Size: S M L XL

WAIVER OF LIABILITY: In consideration for the opportunity to participate in this program or as a parent/guardian of a minor child participating in this program, I recognize that such an undertaking involves an element of risk. Therefore, I assume all risks and hazards incidental to such participation and do hereby release, absolve, indemnify and agree to hold harmless the City of St. Peters, its agents, employees, officers and volunteers and Fleet Feet Sports. Neither the City of St. Peters, nor any of said persons, nor Fleet Feet Sports shall be held financially responsible for any injury, illness or death incurred as a direct result of this activity. I also agree to grant full permission to the City of St. Peters to use my name, photograph, videotape or recording for any publicity promotion purposes without obligation or liability to me or my family. **Registration is invalid without signature.**

Signature of registering participant

Date