



2010 Individual Registration Form

We encourage you to register online at www.utahsummergames.org

Please check to make sure form is signed, has proper events specified and fees listed (available online).

Send completed form with check or money order to

Utah Summer Games, 351 West University Blvd., Cedar City, Utah 84720



PLEASE PRINT LEGIBLY

First Name			MI	Last Name		
Mailing Address						
City			UTAH	Zip		
() -			Gender	<input type="checkbox"/> F	<input type="checkbox"/> M	Date of Birth
Day Phone					Age	
T-Shirt Size <input type="checkbox"/> YM <input type="checkbox"/> YL <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL <input type="checkbox"/> XXL (add \$1.50 extra for XXL Shirt)						
E-Mail Address			Check box if you would like USG to send you updates throughout the year []			

TRIATHLON

____ Sprint ____ Sprint-Relay ____ Olympic USAT Number: _____

Other Information

Parent/Guardian Name (required for all minors under 18 years of age): _____

Is this your first triathlon? Yes ____ No ____

If this is not your first triathlon, is this your first attempt at this distance? Yes ____ No ____

Education: _____ Occupation: _____

Emergency Contact Name: _____ Emergency Contact Phone: _____

Do you have any current or chronic medical conditions which are being monitored by a medical professional?

Yes ____ No ____

Are you taking any medications? Yes ____ No ____

Are you allergic to any medications? Yes ____ No ____

If you answered Yes to any of the above medical questions, please explain: _____

If you will need special assistance during the race (e.g., need eyeglasses handed to you after the swim, etc.), include that information here. _____

Have you overcome any significant hurdles preparing for this event? (Weight loss, stopped smoking, death of loved one, years of inactivity, etc.) _____

List any family members also competing in this event. _____

RELAY TEAM INFORMATION

*Note: By entering your team's information, you will have completing the registration for all athletes.

Your relay team members should NOT register for the event also. They are registered under your account.

Team Member 1 First Name: _____ USAT Number: _____
 Team Member 1 MI: _____
 Team Member 1 Last Name: _____
 Team Member 1 T-Shirt Size: T-Shirt Size YM YL S M L XL XXL (add \$1.50 extra for XXL Shirt)
 Team Member 1 Mailing Address: _____
 Team Member 1 City: _____
 Team Member 1 State: _____
 Team Member 1 Zip: _____
 Team Member 1 Day Phone: _____
 Team Member 1 Gender: Female _____ Male _____
 Team Member 1 E-Mail Address: _____

Team Member 2 First Name: _____ USAT Number: _____
 Team Member 2 MI: _____
 Team Member 2 Last Name: _____
 Team Member 2 T-Shirt Size: T-Shirt Size YM YL S M L XL XXL (add \$1.50 extra for XXL Shirt)
 Team Member 2 Mailing Address: _____
 Team Member 2 City: _____
 Team Member 2 State: _____
 Team Member 2 Zip: _____
 Team Member 2 Day Phone: _____
 Team Member 2 Gender: Female _____ Male _____
 Team Member 2 E-Mail Address: _____

- Check Website for the Allowable Number of Events In Which You May Participate

* - See Sport Page for Additional Information (e.g. best effort in event, handicap, name of doubles partner, relay, team names, etc.)

PLEASE FILL OUT FORM COMPLETELY, SIGN WAIVER ON BACK AND MAIL WITH PAYMENT

2010 Utah Summer Games Individual Fees

Refer to each specific sport page at www.utahsummergames.org for each sport fee and registration deadline information

Payment information: Check # _____ Money Order _____

Please make checks payable to: Utah Summer Games. **Please do not send Cash**

Visa _____ MasterCard _____ Discover _____ American Express _____

Name as it appears on Credit Card

Credit Card Account Number

Expiration (Month/Year)

3 Digit Verification

Multiple Sport Registration
 There is a discount for doing more than one sport. Online registration is encouraged in order to make sure you receive all discounts and incentives.

REGISTRATION FEE	\$	_____
ADDITIONAL SPORT DISCOUNT (-\$15 for second sport)	\$	_____
DONATION	\$	_____
XXL T-SHIRT \$1.50	\$	_____
TOTAL	\$	_____

USG AMATEUR ATHLETIC WAIVER AND RELEASE OF LIABILITY

In consideration of being allowed to participate in any way in the UTAH SUMMER GAMES athletics/sports program and related events and activities:

1. I agree that prior to participating, I will, or if I am the parent or guardian of a minor participant, will instruct such participant that he or she should inspect the facilities and equipment to be used, and if I believe anything is unsafe, I will immediately advise my coach (if I am participating as an athlete) or supervisor of such condition(s) and refuse to participate.
2. I acknowledge and fully understand that I may be engaging in activities that involve risk of serious injury, permanent disability, or death, and severe social and economic losses which might result not only from my own actions, inactions or negligence by actions, inaction or negligence of others, the rules of play, or the conditions of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time.
3. I assume all the forgoing risks and accept personal responsibility for the damages following any such injury, permanent disability, or death.
4. Intending to be legally bound, I do hereby release, waive, discharge and covenant not to sue the UTAH SUMMER GAMES FOUNDATION, sponsor of the UTAH SUMMER GAMES, its affiliates, their respective administrators, officers, directors, agents, coaches, and other employees or volunteers of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and leasers of premises used to conduct the event, all of which are hereinafter referred to as "releasees," from any and all liability to each of the undersigned, his or her heirs and next of kin for any claims, demands, losses, or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise in connection with association or entry in and/or arising out of my travel to, participation in, and returning from competition of the Games.
5. In the event that I sustain injury or illness while competing in the UTAH SUMMER GAMES, I hereby authorize any emergency first aid, medication, medical treatment, or surgery deemed necessary by licensed medical personnel. I also give my permission for attending medical personnel, including college and university trainers, to execute on my behalf my permission forms or other necessary medical documents and to act in my behalf if I am not immediately able to do so.
6. I hereby consent to allow my picture and/or voice likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the UTAH SUMMER GAMES and without compensation to me.
7. I understand that the UTAH SUMMER GAMES will not sell any of my personal information to third parties unless I give my consent and the UTAH SUMMER GAMES reserves the right to contact me about upcoming events or with other notices about the UTAH SUMMER GAMES.

THE UNDERSIGNED HAS READ THE ABOVE WAIVER AND RELEASE AND UNDERSTAND THAT HE/SHE HAS GIVEN UP SUBSTANTIAL RIGHTS BY VOLUNTARILY SIGNING THIS WAIVER.

SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____
(Required if participant is under 18)

BBSC Endurance Sports Triathlon ACKNOWLEDGMENT, WAIVER AND RELEASE FROM LIABILITY (AWRL)

ALL ATHLETES MUST READ AND AGREE TO THE WAIVER---THE ACKNOWLEDGMENT, WAIVER AND RELEASE FROM LIABILITY (AWRL). YOU MUST AGREE THAT YOU ARE COMPLETING YOUR OWN APPLICATION. READ CAREFULLY BEFORE CHECKING THE AGREEMENT BOX. YOUR APPLICATION CANNOT BE PROCESSED UNLESS YOU AGREE TO THE WAIVER. I acknowledge that the sport of 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. I HEREBY ASSUME THE RISKS OF PARTICIPATING IN TRIATHLONS OR MULTI-SPORT EVENTS. I understand the inherent dangers of swimming in open water. I hereby certify that I am capable of completing the swim portion of this event without the use of a wetsuit. I certify that I am physically fit, have sufficiently trained for participation in this event(s), and have not been advised against participation by a qualified health professional. I acknowledge that my statements on this AWRL are being accepted by USA Triathlon (USAT) in consideration for allowing me to become a member of USAT and are being relied upon by BBSC Endurance Sports, the City of Hurricane, USAT and the various race sponsors, organizers and administrators in permitting me to participate in any USAT sanctioned event. In consideration for allowing me to become a member in USAT and allowing me to participate in the BBSC Endurance Sports Triathlon event, USAT sanctioned events. I hereby take the following action for myself, my executors, administrators, heirs, next of kin, successors and assigns, or anyone else who might claim or sue on my behalf, and I expressly acknowledge that it is my intent to take these actions: (a) I AGREE to abide by the Competitive Rules adopted by USAT, including the Medical/Doping Control Rules, as they may be amended from time to time, and I acknowledge that my membership may be revoked or suspended for violation of the Competitive Rules; (b) I AGREE that prior to participating in an event I will inspect the race course, facilities, equipment, and areas to be used and if I believe any are unsafe I will immediately advise the person supervising the event; (c) I WAIVE, RELEASE, AND FOREVER DISCHARGE from any and all claims, losses (economic and non-economic), or liabilities, for death, personal injury, partial or permanent disability, property damage, medical or hospital bills, theft, or damages of any kind, which may in the future arise out of, result from, or relate to my participation in or my traveling to or from the BBSC Endurance Sports Triathlon event, USAT sanctioned event, THE FOLLOWING PERSONS OR ENTITIES: USAT, BBSC ENDURANCE SPORTS EVENTS, THE CITY OF HURRICANE, ST GEORGE, EVENT SPONSORS, RACE DIRECTORS, EVENT PRODUCERS, VOLUNTEERS, ALL STATES, CITIES, COUNTRIES, OR OTHER GOVERNMENTAL BODIES OR LOCATIONS IN WHICH EVENTS OR SEGMENTS OF EVENTS ARE HELD, AND THE OFFICERS, DIRECTORS, EMPLOYEES, REPRESENTATIVES AND AGENTS OF ANY OF THE ABOVE, EVEN IF SUCH CLAIMS, LOSSES, OR LIABILITIES ARE CAUSED BY THE NEGLIGENT ACTS OR OMISSIONS OF THE PERSONS I AM HEREBY RELEASING OR ARE CAUSED BY THE NEGLIGENT ACTS OR OMISSIONS OF ANY OTHER PERSON OR ENTITY; (d) I ACKNOWLEDGE THAT THERE MAY BE TRAFFIC OR PERSONS ON THE COURSE ROUTE, AND I ASSUME THE RISK OF RUNNING, BIKING, SWIMMING OR PARTICIPATING IN ANY OTHER EVENT SANCTIONED BY USAT under these circumstances. I also ASSUME ANY AND ALL OTHER RISKS associated with participating in the BBSC Endurance Sports event, USAT sanctioned events including but not limited to falls, contact and/or effects with other participants, effects of weather including heat, cold, and/or humidity, defective equipment, the condition of the roads, water hazards, contact with other swimmers or boats, and any hazard that may be posed by spectators or volunteers, all such risks being known and appreciated by me; and I further acknowledge that these risks include risks that may be the result of the negligence of persons or entities mentioned above in subparagraph (c) or of other persons or entities. I FURTHER COVENANT AND AGREE NOT TO SUE any of the persons or entities mentioned above in subparagraph (c) for any of the claims, losses, or liabilities that I have waived, released, or discharged herein; and I INDEMNIFY AND HOLD HARMLESS the persons or entities mentioned above in subparagraph (c) from any and all expenses

incurred, claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, (i) my actions or inactions, (ii) my breach or failure to abide by any part of this AWRL including but not limited to my covenant not to sue; (iii) the conditions of the facilities, equipment or areas where the event or activity is being conducted; (iv) my breach or failure to abide by any of the Competitive Rules; or (v) any other harm caused by me; or (vi) any other harm caused by an occurrence related to the BBSC Endurance Sports Triathlon event, a USAT sanctioned event. I FURTHER GRANT PERMISSION for the use of my name and/or likeness relating to my participation in the BBSC Endurance Sports Triathlon, a USAT sanctioned event, and I WAIVE all rights to any future compensation to which I may otherwise be entitled as a result of the use of my name or likeness. I HERE AFFIRM THAT I AM EIGHTEEN (18) YEARS OF AGE OR OLDER, I HAVE READ THIS DOCUMENT, AND I UNDERSTAND ITS CONTENTS. Lost chip fee: I agree to return the Championship timing chip received during Registration/Package Pick Up to the timing team at the end of the race, or to a member of the race producers if I do not participate or complete the course. If the chip is not returned within 30 days I agree to pay the replacement fee of \$30. I agree to pay an additional \$10 late fee if the timing chip is returned after 30 days. IMPORTANT: All participants must show a current valid photo ID to receive their race bag. NO CASH OR CREDIT CARD REFUNDS: A CREDIT TO ANOTHER BBSC ENDURANCE SPORTS EVENT OF 50% OF THE ENTRY FEE CHARGE WILL BE ISSUED IF NOTIFIED IN WRITING 30 CALENDAR DAYS PRIOR TO EVENT. CREDITS WILL BE CONSIDERED FOR MEDICAL REASONS WITH DOCTORS LETTER. ENTRY FEES ARE NOT TRANSFERABLE TO ANOTHER PERSON (USAT CONSIDERS THIS FRAUD). PHOTO IDENTIFICATION MUST BE SHOWN AT REGISTRATION PICK-UP. NO RACE DAY REGISTRATION.

Refund Policy: This policy provides for a grace period in which you may receive an event credit towards one of our future events in the same calendar year. This grace period expires 30 days prior to the race. In the case of a series race, the grace period expires 30 days prior to the first race in the series. The event credit will be for 50% of your entry fee. No event credits will be issued with less than 30 calendar days notice prior to race.

SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____
(Required if participant is under 18)

USAT WAIVER

READ CAREFULLY. THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO SUE USA TRIATHLON AND OTHER PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ IT IN ITS ENTIRETY. SEEK THE ADVICE OF LEGAL COUNSEL IF YOU ARE UNSURE OF ITS EFFECT. 2007 WAIVER AND RELEASE OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT IN CONSIDERATION OF USA Triathlon ("USAT") allowing me to participate in any USAT sanctioned event (the "Event" or "Events") as either a member of USAT or through the issuance of a single event license or permit; I, for myself, and on behalf of my spouse, children, parents, guardians, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement"); I hereby represent that (i) I am in good health and in proper physical condition to participate in the Event; and (ii) I am not under the influence of alcohol or any illicit or prescription drugs which would in any way impair my ability to safely participate in the Event. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Event. I understand and acknowledge the physical and mental rigors associated with triathlon, duathlon, or other multi-sport events, and realize that running, bicycling, swimming and other portions of such Events are inherently dangerous and represent an extreme test of a person's physical and mental limits. I understand that participation involves risks and dangers which include, without limitation, the potential for serious bodily injury, permanent disability, paralysis and death; loss or damage to property; exposure to extreme conditions and circumstances; accidents, illness, contact or collision with other participants, spectators, vehicles or other natural or manmade objects; dangers arising from adverse weather conditions; imperfect course conditions; water, road and surface hazards; equipment failure; inadequate safety measures; participants of varying skill levels; situations beyond the immediate control of the Event Organizers; and other undefined harm or damage which may not be readily foreseeable, and other presently unknown risks and dangers ("Risks"). I understand that these Risks may be caused in whole or in part by my own actions or inactions, the actions or inactions of others participating in the Event, or the acts, inaction or negligence of the Released Parties defined below, and I hereby expressly assume all such Risks and responsibility for any damages, liabilities, losses or expenses which I incur as a result of my participation in the Event. I agree to be familiar with and abide by the Rules and Regulations established for the Event, including but not limited to the Competitive Rules adopted by USAT and the Guide to Prohibited Substances and Prohibited Methods of Doping adopted by the United States Anti-Doping Agency. I also accept sole responsibility for my own conduct and actions while participating in the Event, and the condition and adequacy of my equipment.

I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless the following parties: USAT, the Event Organizers and Promoters, Race Directors, Sponsors, Advertisers, Host Cities, Local Organizing Committees, Venues and Property Owners upon which the Event takes place, Law Enforcement Agencies and other Public Entities providing support for the Event, and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees and volunteers (Individually and Collectively, the "Released Parties" or "Event Organizers"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs and reasonable attorneys fees) of any kind or nature ("Liability") which may arise out of, result from, or relate to my participation in the Event, including claims for Liability caused in whole or in part by the negligence of the Released Parties. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liability which any may be incurred as the result of such claim.

I hereby warrant that I have read this Agreement carefully, understand its terms and conditions, acknowledge that I will be giving up substantial legal rights by signing it (including the rights of the minor, my spouse, children, parents, guardians, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors and assigns), acknowledge that I have signed this Agreement freely and voluntarily, without any inducement, assurance or guarantee, and intend for my signature to serve as confirmation of my complete and unconditional acceptance of the terms, conditions and provisions of this Agreement. This Agreement represents the complete understanding between the parties regarding these issues and no oral representations, statements or inducements have been made apart from this Agreement. If any provision of this Agreement is held to be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Agreement and shall not affect the validity and enforceability of any remaining provisions.

SIGNATURE _____ DATE _____

PARENT/GUARDIAN SIGNATURE _____ DATE _____
(Required if participant is under 18)