



# 2010 Individual Registration Form

We encourage you to register online at [www.utahsummergames.org](http://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](http://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	\$	
<b>TOTAL</b>	<b>\$</b>	

## 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)