

# TARPON TRI

# August 5, 2017 - BAYOU BLACK, LA

## All proceeds benefit the Bayou Black Swim Team

www.tarpontri.net

Race Start Time: 7:30 a.m.

**Race Day check-In:** 6:00 - 7:10 a.m.

\*Mandatory meeting 7:15 a.m.

Where: Bayou Black Gym & Pool 3688 Southdown Mandalay Rd Houma, LA 70360

#### **Sprint Triathlon:**

150 meter pool swim (staggered start) 10 mile bike (Helmet required) 3 mile run

(Race limited to 250 participants)

## Age Groups Male/Female

- 14&U, Then in 5 year increments to 65+
- Youth Relay average age of all participants is 18 or younger
- Adult Relay average age of all participants is 19 and older

#### **Awards**

1st Overall Male / Female 1st, 2nd, 3rd in each age group 1st, 2nd, 3rd youth & adult relays \*\* There is no fat tire division in this race

\*\* There is no Athena or Clydesdale division

Entry Fees: Individual / Relay Received by July. 12<sup>th</sup> \$40\* / \$80\* July 13<sup>th</sup> - August 2nd \$50\* / \$100\* \*plus additional USAT fees if not a USAT member

- There is NO race day registration! Registration must be received by August 2nd! NO exceptions!!
- Shirts & packet items are not guaranteed for registrations after July 12<sup>th</sup>.
- No Refunds.

### Register online at:

www.imathlete.com/events/tarpontri

Or

### Mail Registration with check payable to: TPRD # 9

c/o Michelle Matta 3688 Southdown Mandalay Dr. Houma, LA 70360

All race details (i.e. - swim time) must be finalized by 4:00 pm on 8/4/16.

#### Packet Pick Up:

Studio Matrix; 308 Venture Blvd. Friday, 8/4/17, time TBA Race Day 6:00 - 7:00 a.m. at race site

Awards, food, drinks and music after the race!





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# Wed & Conquered

### www.tarpontri.net

Participant Name:		Phone:			
Address:					
	Street				
city		state	zip co	 ode	
Email:					
Emergency contact name & Number					
Any known medical conditions:					
Estimated 150 meter swim time:	Gende	er:M	F Birthdat	:e:	
USAT number:	( <u>if not a U</u>	SAT member	; a one day me	mbership will need	
be purchased through the race director to			-	_	
filled out and sent back to the race director membership (17&under) is \$10 & only avail	-	•		lt. A youth	
Shirt size: YS YM YL S M					
Do you want a female fit shirt? Yes	No				
Participant type: Individual ( If a relay, list team member names & ev	Relay	o).			
( in a relay, list could member hames a re-	verre ederi vvik e	٠,٠			
				-	
Relay team name:					

**MUST SIGN LIABILITY WAIVER ON NEXT PAGE & SUBMIT WITH APPLICATION!!** 

#### **Liability Waiver**

#### \*\*\* Please note, each relay team member must fill out and sign a form to participate!!

Liability Waiver must be signed by all participants before submitting.

In consideration of my accepting this entry, I, the undersigned, intending to be legally bound for myself, my heirs, executors, waive and release any and all rights and claims for damages I may have against Bayou Runners Association, the city of Houma, Terrebonne Parish Consolidated Government, TPRD #9, Bayou Black Swim Team, USAT, and all sponsors, their representatives and successors from all claims or liabilities of any kind with my participation in this event. I attest and verify that I am physically fit and sufficiently trained for the competition of this event. Further, I hereby grant full permission to any and all foregoing to use photographs, videotapes, motion pictures, records or any other record of this event for any purpose whatsoever. I also acknowledge that this race has a no refund policy.

Participant r	name (please Print)		
Signature		Date	
_	(Parent or guardian signature if under 18 years old)		

PLEASE REMEMBER TO MAKE REGISTRATION CHECKS PAYABLE TO: TPRD #9

PLEASE MAKE USAT ANNUAL OR ONE DAY FEES TO: USA TRIATHLON