

# Splash & Dash Kids Triathlon

Give it a Try!

**Sunday, September 20, 2009 - 2:00 PM**  
**Benefiting Pitt County Special Olympics**  
 City of Greenville's Aquatics and Fitness Center  
 [921 Staton Rd., Greenville, NC 27834]



Sponsored by  
 City of Greenville

**Divisions and Distances:**

Individuals or 3 Member Relay Teams (If Relay, all 3 members of team must be in same age division)  
 Ages 6-8      25yd Swim.....2mi Bike..... 1/2mi Run  
 Ages 9-11     75yd Swim.....2mi Bike..... 1mi Run  
 Ages 12-14    125yd Swim.....2mi Bike.....2mi Run

**Registration:**

*Register Soon - Race is limited to 200 entries!*

**Please make check payable to "Pitt County Special Olympics" (DO NOT send cash)**

Mail this completed entry form and signed waiver along with payment no later than September 12, 2009, to:  
 Dietra Crandol, 2000 Cedar Ln. Greenville, NC 27858

-- OR --

Register online at [www.Active.com](http://www.Active.com) now thru September 16, 2009

Sorry – *No Race Day Registration -- No refunds*

Forms can also be downloaded from [www.GreenvilleKidsTri.org](http://www.GreenvilleKidsTri.org)

For more Information send e-mail to [kidstri@greenvillenc.gov](mailto:kidstri@greenvillenc.gov) or visit [www.GreenvilleKidsTri.org](http://www.GreenvilleKidsTri.org)

**Course:**

Pool Swim attended by lifeguards. Bike course is single 2 mile loop on closed paved road monitored by police. Run is a single loop course on the surrounding property of the Greenville Aquatics and Fitness Center complex (distance depending on age category).

**Awards:**

Finisher prize presented to all finishers.  
 Top 3 male and female in each age division.  
 Top Relay in each age Division

**T-Shirts:**

All registered participants

**Post Race Fun:**

Free food and drink for all participants provided by our sponsors. Door prizes and other activities for the kids.

About a week prior to the event, detailed race day information like rules, packet pickup times, swim start order, etc. will be e-mailed to you and also posted on the web. Please be sure to provide your e-mail address as well as check the website for this information as the date draws near.



**Entry Fee:**      Received on or before August 24, 2009..... Individual \$30\_\_\_\_      Relay Team \$70\_\_\_\_  
                          After August 24, 2009..... Individual \$40\_\_\_\_      Relay Team \$90\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_  
 Age on Sept. 28<sup>th</sup> \_\_\_\_\_ Sex \_\_\_ M \_\_\_ F    Shirt Size \_\_\_\_\_ E-Mail \_\_\_\_\_  
 Home Phone \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_    Address: \_\_\_\_\_    City: \_\_\_\_\_  
 State: \_\_\_\_\_ Zip \_\_\_\_\_

If Relay Team, Please list team name and members names and ages: \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

GREENVILLE AQUATICS AND FITNESS CENTER

MINOR PERMISSION AND RELEASE (Nonmember)

In consideration of my child \_\_\_\_\_, I give my permission for him/her to participate in the 2009 Splash & Dash Kids Triathlon, sponsored by the Greenville Recreation and Parks Department. I hereby release and hold harmless the City of Greenville, the Greenville Aquatics and Fitness Center, the Greenville Recreation and Parks Department, its employees, and volunteers from any claims of negligence including claims for injuries, accidents or loss of property in connection with my child's participation in the 2009 Splash & Dash Kids Triathlon and use of the facilities and equipment of the Greenville Recreation and Parks Department. This release is binding and applicable to myself, my child, my family, my heirs, my child's heirs and guardians and successors in interest.

I declare and certify that my child's physician has released and cleared my child to participate in the 2009 Splash & Dash Kids Triathlon offered by the Greenville Recreation and Parks Department. For the safe enjoyment of this program and all participants, the Greenville Aquatics and Fitness Center staff has established specific rules and regulations pertaining to conduct, use of the equipment and facilities. I have read the "General Rules and Information" and agree that both my child and I will abide by the rules and regulations. I understand that my child's or my failure to follow the rules and regulations will result in the termination of my child and myself participation in this and other programs offered by GAFC and the Greenville Recreation and Parks Department.

In the event that my child is injured or become ill and I am not available or unable to be reached within a reasonable period of time to secure medical treatment for my child, I hereby authorize the Recreation and Parks staff to obtain medical treatment for my child including but not limited to emergency treatment and transport, selection of physician and other medical personnel necessary to treat my child and to take whatever medical action and treatment that is deemed necessary for my child and at my expense.

In the event of promotional activities, I hereby grant my permission to the City of Greenville to use photographs and video images of my child where using the facilities and participating in the programs provided by the City of Greenville, Department of Recreation and Parks and the Greenville Aquatics and Fitness Center.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

(a separate form must be completed for each child)