



# **MOUNTS BAY HARRIERS**

## **PENZANCE TRIATHLON**

### **EASTER SUNDAY, 4 APRIL 2010**

**PENZANCE LEISURE CENTRE, ST CLARE, PENZANCE**

**Registration from 7.00am – Swim start from 8.00am**

**400 metre pool swim / 15.5 mile bike / 4 mile run**

**Prizes for all categories – Memento and medal to all finishers**

**CLOSING DATE FOR ENTRIES: 28 March 2010 or when entry limit of 100 is reached – no entries on the day**

SURNAME.....FORENAME.....

AGE AT 31/12/10.....DATE OF BIRTH...../...../..... SEX: M / F.....

ADDRESS.....

.....POST CODE .....

EMAIL ADDRESS.....

TELEPHONE.....

BTF NUMBER .....CLUB.....

ESTIMATED SWIM .....MINS .....SECS **IS THIS YOUR FIRST TRIATHLON ?**.....

Please make cheques payable to “**Mounts Bay Harriers**” £27 (£2 refund on production of BTF race licence)

**I DECLARE THAT:-**

- 1 I am 17 years or over as at 31 December 2010.
- 2 I enter and intend to compete entirely at my own risk and not participate unless I am fit. If unsure please contact your doctor.
- 3 I agree to provide myself with a bicycle in a roadworthy condition.
- 4 I agree to provide myself with a BTF approved hard shell cycle helmet.
- 5 I agree to abide by the BTF rules of the event. The Race Director’s and Referee’s decision is final.
- 6 I agree that under no circumstances will any refunds be given.
- 7 I accept that the event is affiliated to the BTF and run under their Rules.
- 8 I agree to photos of the event being used for publicity purposes.
- 9 I indemnify the promoters, organisers and sponsors against a claim for any accident, loss or damage as a consequence of my participation in this event.

SIGNED.....DATE.....

(Parent or guardian if under 18 years of age)

PLEASE RETURN FORM TO:-

**MOUNTS BAY HARRIERS, 7 ATLANTIC CRESCENT, SENNEN, PENZANCE, TR19 7AS**

**info@mountsbayharriers.org.uk / www.mountsbayharriers.co.uk**