

**City of Monticello Recreation Department 24th Annual
Blue Mountain Canyonlands Triathlon**

Saturday, March 7th 2009

·NO LATE REGISTRATION·

Complete and Mail this Form so that it is received by March 4, 2009

First Name: _____ MI. ____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Age on Race Day: _____ Gender: M F Email: _____

Phone Number: _____

*Circle T-shirt Size: S M L XL XXL

Category:

Individual _____ Bike Only _____ Ski Only _____ Run Only _____

Team _____

*Circle Team Division: All Male
All Female
Mixed
Family – Immediate
Youth 18 & under

	Last Name,	First Name	Age	Gender	T-shirt Size
Team Skier:	_____	_____	___	M F	S M L XL XXL
Team Biker:	_____	_____	___	M F	S M L XL XXL
Team Runner:	_____	_____	___	M F	S M L XL XXI

WAIVER:

I recognize that there is an element of risk in any adventure, sport, or activity associated with the outdoors. I am fully cognizant of the risks and dangers inherent in the Blue Mountain Canyonlands Triathlon and have been informed of known special hazards in such activity. A copy of a notice of such hazards is attached hereto and made a part hereof, and I, and the adult members of my family, have read the same. I certify that my family and I, including minor children, are fully capable of participating in the said activity.

Therefore, I assume full responsibility for personal injury to myself and or to members of my family, or for loss or damage to my personal property and expenses thereof as a result of my negligence or the negligence of my family participating in said activity, except to the extent such damage or injury may be due to the negligence of the Monticello City Recreation Department. I further understand that Monticello City Recreation reserves the right to refuse any person it judges to be incapable of meeting the rigors and requirements of participating in the Blue Mountain Canyonlands Triathlon.

I have read, understand, and accept the terms and conditions stated herein and acknowledge that this agreement shall be effective and binding upon the parties during the entire period of participation of the said activity.

PARENT or Guardian (if entrant is under 18)

As parent of the Participant, I understand and accept that all above conditions apply to both of us.

Signature Date Parent or Guardian (participants under 18) Date

FEES

Entry Fee Individual: \$30

Entry Fee Teams: \$90

Mail completed entry and Check to:

Monticello City Recreation

P0 Box 457

Monticello, UT. 84535

435-587-2029

eddie@monticelloutah.org