

BIG little Duathlon!



Showgrounds, Wanaka. Saturday 22nd October, 2011.

8:30am - Bike Racking, Registration and Briefing

9:00am - Race Start

Athlete Information

Adult

Name _____
Address _____
Phone (W) _____
(H) _____
Mobile _____
Email _____
DOB _____ Age _____
Emergency Contact _____
Emergency # _____

Child

Name _____
Address _____
Phone (W) _____
(H) _____
Mobile _____
Email _____
DOB _____ Age _____
Emergency Contact _____
Emergency # _____

Event Categories

Category 1	<input type="checkbox"/> School Year 1	Approx.	500m Walk/Run -1km Cycle
Category 2	<input type="checkbox"/> School Year 2		500m Walk/Run -1km Cycle
Category 3	<input type="checkbox"/> School Year 3		700m Walk/Run -1.5 km Cycle
Category 4	<input type="checkbox"/> School Year 4		700m Walk/Run -1.5 km Cycle
Category 5	<input type="checkbox"/> School Year 5		1km Walk/Run -2 km Cycle
Category 6	<input type="checkbox"/> School Year 6		1km Walk/Run -2 km Cycle

Payment

Cost \$10 per team

Payment Due: \$10 Payment Received: \$

(Post Cheques to ProActive Gym, 17 Plantation Road, Wanaka)

Payment Method (circle one) Eftpos

Credit Card

Cash

Cheque

Thanks to our Sponsors!



Event Waiver and Terms

- Whilst every endeavor will be made to ensure my safety, I understand that a competitive duathlon involves the risk of serious injury or even death from various causes including over exertion, equipment failure, dehydration, accidents with other participants, spectators or road users, course or weather conditions and other causes.
- I understand that I should not compete in this event unless I have trained appropriately and have had a full medical check-up including assessing any existing health concerns before undertaking this event.
- By competing, I accept all risks necessarily flowing from my participation and the child participating with me, which could result in loss of life or injury. Accordingly, I release all persons or corporations associated directly or indirectly with the conduct of the event including without limitation the ProActive Health and Fitness Club and sponsors of the event from all claims, demands and proceedings arising out of my and the child's participation and I hereby hold harmless and indemnify them against all liability (including liability for their negligence and the negligence of others) for all injury, loss or damage arising out of or connected with my participation in this event. For the avoidance of doubt, this release shall extend to and include all sponsors, ProActive Health and Fitness and their respective directors, managers, contractors, employees and volunteers including medical and paramedical personnel appointed for the event. The owners, licensees and occupiers of land upon which the event or any part of it is conducted, any statutory body or local authority having control over any land on which the event is conducted or which is involved directly or indirectly with the event in any manner whatsoever and promoters, sponsors and event organizers. This release and indemnity continues forever and binds my heirs, executors, personal representatives and assigns.
- I consent to receiving any medical treatment for me or the child that the event organizers and/or their medical advisors think is necessary during or after the event.
- I consent to ProActive Health and Fitness and sponsors using my name or child's name, image and likeness before, during or after the event for event promotional or broadcasting for reporting purposes in any media.
- Safety precautions undertaken by event organizers or (such as core supervision and race safety briefings) are a service to me, my teammate and other participants. I recognize that such steps are not a guarantee of my safety.
- I am fully responsible for the security of my personal possessions (and the child's) at the event, before, during and after the completion of it.
- I acknowledge and agree that my registration fee is non-refundable and if we are unable to attend the event for any reason my registration fee will be forfeited.
- I agree to abide by all event rules and directions issued by ProActive Health and Fitness.
- I acknowledge that by reason of circumstances of ProActive Health and Fitness including the weather, it maybe come necessary to change the format of the event, and if that occurs, I consent to the changes and I agree to each and every one of the conditions herein set out shall apply to the changed event.
- If the event is cancelled due to flood, cyclone, torrential rains or act of God conditions, I understand that the entry fee will not be refunded.
- I hereby certify that I take responsibility for the child I am racing with on the day of the event.
- I agree to my name and contact details (including email and mobile) being included on the event database which may be used for any commercial purpose as well as to receive information from ProActive Health and Fitness and their sponsors for this event and any future event.
- It is compulsory that I must wear the wristbands provided for the event.
- I acknowledge that my entry will not be accepted unless I have signed and agreed to the above terms by signing below.

I have read understood and accept the waiver and terms outlined above.

Signed _____ Dated _____