

DARLINGTON TRI

TEESDALE TRIATHLON

Name _____

D.O.B _____

Gender _____

British Triathlon #: _____

Club _____

Address _____

Post Code _____

Email* _____

Telephone _____

Do you have any medical conditions or disabilities? _____

Emergency contact details:

Name _____

Telephone _____

Estimated swim time (400m) _____

**Please ensure a correct Email address is provided as we will contact you with your start time for the swim via Email prior to the event.*

I declare that I am fit to take part in the Teesdale Triathlon 2010 and understand that I participate entirely at my own risk. I hereby relieve the race referee & organisers of responsibility for any injury, loss or damage sustained to my person or property howsoever caused. I also declare that my cycle is in a roadworthy condition. I agree to abide by the rules of the BTF & accept that the decision of the race referee is final.

Signature _____

Date _____

Supported by



July 25th

400m swim

28km bike

5km run

@ Teesdale Leisure Centre
Barnard Castle

£20*

**£22 for non BTF members
Closing date July 11th (entry limit: 150)*

Please make cheques payable to **Darlington Triathlon Club.**

Post entries to:

**5 Chapelhope Close
Darlington
DL1 3TR**

Email_
teesdaletriathlon@hotmail.com

Web_
www.darlingtontri.com
www.trihard.co.uk