SARATOGA SPRINGS LIONS FOUNDATION - 2009 DUATHLON

Sunday May 24, 2009

PARTICIPANT INFO: (For teams - Please fill out an entry form for each member and submit them together.)

_____ _____ _____
Last Name *First Name* *MI*

_____ _____ _____ _____
Street Address *City* *State* *Zip Code*

_____ ( ) _____
E-Mail *Phone*

Age: _____ **Gender:** _____ _____ **Shirt size:** _____ _____ _____ _____ _____
Day of Race *Male* *Female* *Small* *Medium* *Large* *X-Large* *XX-Large*

Individual Entry..... ☐
Two Person Team..... ☐
Three Person Team ..... ☐
Male Team ..... ☐
Female Team..... ☐

Relay Team First Runner..... ☐
Relay Team Bicycle..... ☐
Relay Team Second Runner..... ☐
Corporate Team ..... ☐
Mixed Team..... ☐

Relay Team Name or Corporation Name: _____

Pre-registration (closes 5/17/2009)
$50 - Individual
$75 - 2 person team
$95 - 3 person or corporate team

Day of Race Registration
$60 - Individual
$90 - 2 person team
$120 - 3 person or corporate team

Raffle Tickets - $20 each
Grand prize - Serotta Bike
2nd prize - Southwest Airline tickets
3rd prize - Mirror Lake Inn and Golf
4th & 5th prizes - $250 gift certificates to Blue Sky Bicycles

Please indicate the number of raffle tickets you would like to purchase: _____

In consideration of this entry being accepted, I the undersigned, intending to be legally bound, hereby for myself or any one entitled to enact on my behalf, waive and release any and all rights and claims for damages that I may have against the Saratoga Lions Foundation, Skidmore College, any officials, or promoters of this race, all sponsors, volunteers, workers, City of Saratoga Springs, Town of Greenfield, County Of Saratoga for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and sufficiently trained for the completion of this race. Fee is non refundable.

_____ _____
Signature ***Date***
(If under 18 parent or guardian signature is required)

Amount Enclosed: $ _____

Please make checks payable to:

Saratoga Springs Lions Foundation
(Donations to Lions Foundation are tax deductible)

Mail to:

Saratoga Springs Lions
PO Box 166
Saratoga Springs, NY 12866

Race Director Use:

BIB NO: _____ ***Paid: Cash*** ___ ***Check*** _____ _____ ***Registered*** ___ ***Date*** _____
Amount *Check No*