

# HOUSTON TEXANS KIDS TRIATHLON

## Participant Information

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age of Participant on 12/31/2018 \_\_\_\_\_ \* NOTE: This is the age you will race at, even if you are not yet this age on race day

Gender  Male  Female T-Shirt Size **Youth**  S  M  L  XL **Adult**  S  M  L  XL USATriathlon # \_\_\_\_\_ (if applicable)

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Group/Team Name \_\_\_\_\_

Parent/Guardian \_\_\_\_\_ Relationship \_\_\_\_\_

How did you hear about this event? \_\_\_\_\_

What kind of bike do you expect your child to use in the race?

Beach Cruiser / BMX (single gear)

Mountain Bike

Hybrid (with gears)

Road Bike (skinny tires & gears)

Prior to this event, how many triathlons has your child completed?

None - this will be their first

1 - 4

5 - 8

9 or more

What is your child's #1 reason for participating?

To have fun!

To be healthy

To do something with friends

The competition

After reading the description on the previous page are you interested in having your child race in the XClass - a separate race only for experienced kid triathletes?

Yes  No  Not sure, please contact me with more information

## Important Medical Information - Please Tell Us About Any Special Consideration or Needs Your Child May Have

For safety and insurance reasons, The Houston Texans Kids Triathlon is sanctioned by USATriathlon. This requires that every participant be a current member of USATriathlon. **This means you are required to select 1 of registration options detailed below.**

Registration Type (Check One)	FEE
<input type="checkbox"/> 1. The Houston Texans Kids Registration (for a Current USATriathlon Member) (Select this option ONLY if your child is a current member of USAT. You are required to enter the child's USAT number above.)	<b>\$50</b>
<input type="checkbox"/> 2. The Houston Texans Kids Registration (PLUS an Annual Membership in USATriathlon) (It includes \$50 race fee and \$10 for Annual USAT Membership Package.)	<b>\$60</b>
<input type="checkbox"/> 3. Texans Children's Hospital (Special Invitation Only)	<b>Complimentary</b>

Please return completed forms to:  
alexandra.comerota@houstontexans.com

**DISCLAIMER** Kids Triathlon, Inc., a nonprofit entity that is not affiliated with the Houston Texans, is the party responsible for the operation and logistics of the Triathlon, including the receipt of registration fees and the payment of expenses. Given the unpredictable nature of weather and the fact that most of the costs of running a kids triathlon are incurred well before the race ever happens, it is the policy of Kids Triathlon, Inc. not to offer refunds of registration fees in the unlikely event a race is cancelled. Although the parties will make good faith efforts to reschedule the race, this may not be possible due to all of the calendars that must be coordinated (often months in advance). By paying your registration fee to Kids Triathlon, Inc., you acknowledge that you understand and agree to this policy and release Kids Triathlon, Inc., the Houston Texans, Texas Children's Hospital, and any other parties affiliated with the Triathlon from any claims that you are entitled to a refund. We appreciate your support and understanding.

**Houston Kids Triathlon Release Waiver:** I understand the Entry Fees are Non-Refundable & Non-Transferable. In consideration of accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my children, my heirs, executors and administrators, waive and release any and all rights and claims for loses and damages I may have against Kids Triathlon, Inc., The Houston Texans Kids Triathlon, The YMCA of Greater Houston, The Houston Texans, the sponsors of the race, the race officials, volunteers, town, police, lifeguards, fire department, and their representatives and successors and assigns for any and all injuries suffered by me in said event. I attest and verify that the child (name listed above) is physically fit and sufficiently trained for the competition of this event, and that a licensed medical doctor has verified his / her physical condition. I know that participating in this event is potentially a hazardous activity. I understand that I may be issued a timing chip for use during the event and that I am responsible for returning the chip after the event or agree to pay a replacement fee of \$40. I should not enter unless he / she is medically able and properly trained. I agree to abide by any decisions of race officials relative to his / her ability to safely complete the course. I assume all risks associated with participating in this event including, but not limited to, falls, contact with other participants, the effects of weather, including heat and/or humidity, traffic and conditions of the road. He / she will compete with due care. Further, I hereby grant full permission to any and all of the foregoing to use any email, photographs, videotapes, motion pictures, recording or any other record of this event for any purpose whatsoever.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please Complete Form, Sign and Return Entire Page*