

SATURDAY, JUNE 11, 2011 at 8:00am SHARP HARRY BOWEN PARK, PORT REPUBLIC, NJ (15 miles NW of Atlantic City)

Jersey Genesis Triathlon Champion Chip Timing

Swim: 1/2 mile, Bike: 16 miles, helmet required, Run: 4 miles \$55 pre, \$70 post, \$90 team, \$60 high school challenge (non-USAT members add \$10 to entry fee for 1 day insurance)

AWARDS: TOP 5: Overall male and female. TOP 3: Male & female awards in each age group: Under 19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65+ RELAY TEAMS/HIGH SCHOOL CHALLENGE: Male, Female, Co-ed

Bambino Biathlon: Ages 5-12

Run: 1/4 mile, Bike: 2 miles, helmet required, Run: 1/4 mile \$15 individual, \$35 per family

AWARDS: TOP 3: Overall boy and girl TOP 3: In each age group: 5-6, 7-8, 9-10, 11-12

T-shirts to all participants. Post-race refreshments served.

For more information or to register visit **www.JerseyGenesisTriathlon.com** or contact Bill Smallwood: 609-652-6154, e-mail: JerseyGenesisTri@aol.com

Make checks pay	yable to: Port Republ	ic Athletic Fund, I	nc. P.O. Box 86 Port Rep	ublic, New Je	rsey 08241
FIRST NAME LA			NAME		AGE
ADDRESS					. SEX
CITY			STATE	ZIP	
PHONE		E-MAIL			
ENTERING AS: (CHECK ONE)			T-SHIRT SIZE:		
Individual	Policeman	Male Team	🗅 Bambino Individual	Youth M	Adult M
Port Resident	Clydesdale	Female Team	Bambino Family	Youth L	Adult L
Military or Vets	Athena	Mixed Team	Family No :	Adult S	Adult XL
Fireman	1st Timer only if 1st	Team Name:	-		

Youngest Finisher
time in ANY triathlon
Each team member must register.
PLEASE READ CAREFULLY BEFORE SIGNING. IN CONSIDERATION OF THE ACCEPTANCE OF MY ENTRY IN THE JERSEY GENESIS TRIATHLON, I, MY HEIRS, EXECUTORS AND ADMINISTRATORS
HEREBY DISCHARGE THE PORT REPUBLIC ATHLETIC FUND, COMPUSCORE, THE PORT REPUBLIC VOLUNTEER FIRE COMPANY, THE CITIES OF PORT REPUBLIC AND EGG HARBOR, THE
TOWNSHIP OF GALLOWAY, ALL SPONSERS AND PRODUCERS OF THIS EVENT, THEIR AGENTS, OFFICERS, EMPLOYEES, VOLUNTEERS, EVENT DIRECTORS AND EVENT HOLDERS AND ANYONE
ASSOCIATED IN ANY WAY WITH THE EVENT, FROM ALL LIABILITIES, ACTIONS, CLAIMS, DEMANDS, DAMAGES, COSTS AND EXPENSES WHICH I MAY NOW OR IN THE FUTURE HAVE AGAINST THEM
ARISING OUT OF MY PARTICIPATION IN THE ABOVE MENTIONED EVENT, INCLUDING BUT NOT LIMITED TO ALL INJURIES THAT MAY BE SUFFERED BY ME. LATTEST AND VERIFY THAT TO THE BEST
OF MY KNOWLEDGE, MY PHYSICAL CONDITION AND FITNESS ARE ADEQUATE FOR ME TO SAFELY COMPETE IN THE TRIATHLON.

I CERTIFY THAT I HAVE READ THIS DOCUMENT.

SIGNATURE	DATE
PARENT OR GUARDIAN	IF UNDER 18