



Splash and Dash

9th Annual
YMCA of Lenawee County Youth Triathlon

Saturday July 8, 2017

Splash & Dash Youth Triathlon/Duathlon benefits the YMCA of Lenawee County 2017 Strong Kids Fund.

Youth Triathlon & Duathlon (ages 7-14)

Fee: Pay by July 7: \$10
Pay on Race Day: \$20
Includes t-shirt, award, & goodie bag

Age Groups:

Age 7-10*
Tri: 100m swim, 2 mile bike, half mile run
Du: 1/4 mile run, 2 mile bike, half-mile run

Age 11-14
Tri: 200m swim, 4 mile bike, 1 mile run
Du: half-mile run, 4 mile bike, 1 mile run

*Advanced 5 & 6 year olds are welcome!
*Register by June 26 to be guaranteed a t-shirt.

Fun Run (ages 3-6)

Half Mile Run

Fee: Pay by July 7: \$5
Pay on Race Day: \$10
Includes t-shirt, award, & goodie bag

For more info, contact:
YMCA of Lenawee County
638 W. Maumee St, Adrian, MI 49221
(517) 263-2151
ymcaoflenawee.org

*Register by June 26 to be guaranteed a t-shirt.

Pre-race packet pick up on Friday, July 7 at Bohn Pool from 4:30-7:00pm.

Stop by for the Triathlon 101 Clinic starting at 5:00pm!

The Race Director and Honorable Gregg Iddings will be available to answer questions and provide a quick triathlon demonstration.

2017 Splash & Dash Registration

Race Deadlines & Fees

Triathlon & Duathlon

Register by July 7th: \$10

Register on Race Day: \$20

Fun Run

Register by July 7th: \$5

Register on Race Day: \$10

Register at the YMCA of Lenawee County!

YMCA of Lenawee County
638 W. Maumee St.
Adrian, MI 49221
517-263-2151
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Race Participant Information

Name: _____

Gender: M / F Birthdate: _____

Age on race day: _____

Triathlon Duathlon Fun Run

T-Shirt Size: Youth S M L
Adult S M L XL

*Please note that registrants after June 26 may not receive a t-shirt & goodie bag the day of the event.

Address: _____

City: _____ State: _____ Zip: _____

School: _____

Parent's Name: _____

Phone #: _____

Email: _____

Medical Release Consent and Waiver

As a parent and/or guardian, I do herewith authorize the treatment by a qualified and licensed medical doctor of the following minor in the event of a medical emergency which, in the opinion of the attending physician, may endanger his or her life, or cause disfigurement, physical impairment, or undue discomfort if delayed. The authority is granted only after a reasonable effort has been made to reach me. This release form is completed and signed of my own free will with the sole purpose of authorizing medical treatment under emergency circumstances in my absence. I certify that I (the parent or guardian) and my child have read the MDCH concussion information found online at http://michigan.gov/documents/mdch/parentsfactsheet_415323.pdf on the YMCA website under Youth Sports or at the front desk of the YMCA. I hereby release the YMCA of Lenawee County, The City of Adrian, all associated sponsors of the event and any associated persons or employees from any claims for any injuries, personal losses, or damage done to personal property while on the premises of either the YMCA of Lenawee County, or the City of Adrian properties associated with specific programs of these organizations. By signing below, I also authorize the publication of any photography taken for or during any YMCA or City of Adrian program for the use of promoting or advertising further programs, unless I notify the YMCA of Lenawee County or the City of Adrian of my desire not to permit any published photos at the time of registration.

Other Contact In Case of Emergency

Name: _____ Relationship: _____

Home/Cell Phone: _____ Participant Disability or Allergy: _____

Family Physician: _____ Phone: _____

Parent's Signature: _____ Date: _____

No one is denied participation in YMCA of Lenawee County programs due solely to the inability to pay. Financial Assistance is available to those who qualify. For more information, please call 517-263-2151.

Race Day Information

Check-in closes at 8:45AM

Fun Run starts at 9:00AM

Triathlon starts on pool deck at 9:30AM

Awards at approx. 11:15AM

Bohn Pool will be open for FREE swimming following the race!