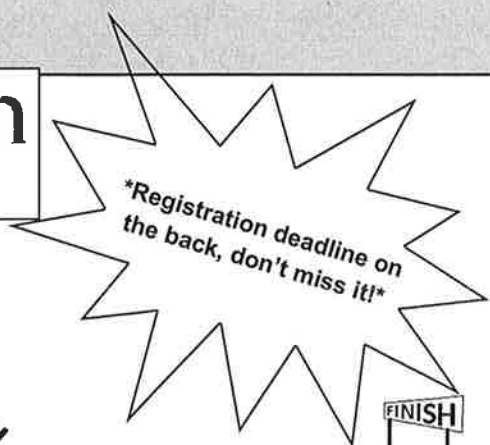


6th Annual



**Intermountain  
Riverton Hospital**



# Indoor



# Triathlon & Health Fair

FINISH

**\$40**

### Super Sprint

- 250 Yard Swim
- 8 Mile Bike
- 2 Mile Run

All Ages.

**\$20**

### Kid's Triathlon

- 50 Yard Swim
- 3 Mile Bike
- 1 Mile Run

Ages 7-14.

- Registration includes t-shirt.
- Awards given to top finishers.
- Free swimming for participants and their families.
- Finisher medals.
- Register early. Event may sell out.
- Register by January 7th to guarantee a t-shirt.
- Health fair free and open to the public.

- Swim: Indoor Pool
- Bike: Spin Bikes
- Run: Indoor Track

### Registration and more info:

Online:

<http://www.slco.org/recreation/jlsorenson>

In-Person or by Mail: (See Reverse)

J.L. Sorenson Recreation Center  
 5350 W Herriman Main Street  
 Herriman, UT 84096

Scan the QR code for more info! →



Saturday, January 21st 2017

8am Start

Location: J.L. Sorenson Recreation Center


Select Race: Go to [www.recreation.slco.org/jlsorenson](http://www.recreation.slco.org/jlsorenson) for additional information!

- Super Sprint Triathlon \$40.00 until Saturday, January 14th  
 \$45.00 for late registration
- Kids Triathlon (7-14 yrs. only) \$20.00 until Saturday, January 14th  
 \$25.00 for late registration

Estimated Swim Time(250y/ 50y): \_\_\_\_\_ Estimated Bike Time (8mi/ 3mi): \_\_\_\_\_

All wave assignments will be posted on our website by Friday, January 20th. The competition will be seeded by fastest swim times first. The fastest wave will begin at 8:00am and every 35 minutes thereafter. Children MUST be able to use the spin bikes. Try the spin bikes at the recreation center prior to registration. The fastest kids wave will begin at 65 minutes after the start of the last adult wave and every 25 minutes thereafter. **No day of race registrations accepted. DROP DEAD DEADLINE JANUARY 20.** *Numbers are limited: Register early.*

Race Shirt Size: **\*RACE DETAILS ARE SUBJECT TO CHANGE**  
 Youth: S M L \*Shirts are not guaranteed after January 7th  
 Adult: S M L XL XXL

  Check here to be contacted about inclusion opportunities for people with disabilities.

Name of Participant \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_

Birth Date \_\_\_\_\_ Age \_\_\_\_\_

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

State \_\_\_\_\_ Zip \_\_\_\_\_ E-mail Address \_\_\_\_\_

Parent or Guardian (if under 18) \_\_\_\_\_ Phone \_\_\_\_\_

In Emergency Notify (other than parent / guardian) \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Parental Statement of Agreement – Assumption of Risk, Liability Release and Refund Policy

**Assumption of Risk:** I hereby acknowledge and agree that my child's participation in recreational activities involves inherent foreseeable and unforeseeable risks and hazards which may expose my child, or me, to illness, injury, or death. In consideration of my child's participation in such activities, I for myself, my child, my heirs, my executors and administrators, freely and voluntarily agree to assume and accept any and all risks to my child or myself associated with my child's participation in Salt Lake County recreational activities.

**Release:** In consideration of my child's participation in the Salt Lake County recreational activities, I, for myself, my child, my heirs, my executors and administrators hereby release Salt Lake County and its officers, agents, and employees from any cause of action, claim, or demand of any nature whatsoever I or my child may now have, or have in the future, against Salt Lake County on account of personal injury, property damage, death, or accident of any kind, caused by, arising out of, or in any way related to my child's participation in Salt Lake County recreational activities.

**Indemnification:** In consideration of my child's participation in the Salt Lake County recreational activities, I agree to indemnify and hold harmless County, its officers, agents, and employees from any and all causes of action, claims, demands, losses, or costs of any nature whatever cause by, arising out of, or in any way related to my child's participation in the Salt Lake County recreational activities. I agree that my duty to defend and indemnify the County under this Agreement includes all attorney fees, litigation and court costs, expert witness fees, and any sums expended by or assessed against the County for the defense of any claim or to satisfy any settlement, arbitration award, or verdict paid or incurred on behalf of the County arising out of or in any way related to my child's participation in the Salt Lake County recreational activities.

**Refund:** Refunds may only be requested in person and must be accompanied by a written request. As per Salt Lake County policy and procedures the Parks and Recreation Division may withhold 25% of the refund (program registration fee) for administrative costs. No refunds shall be given after the first day of the program.

**Collections:** I agree to pay Salt Lake County all costs incurred, together with reasonable attorney's fees in the event that my account is referred for collection. I understand that any account delinquent 30 days or more will be turned over to collection.

**Emergency Treatment:** I hereby authorize Salt Lake Parks and Recreation program staff to act on my behalf in accordance with their best judgment in case of an emergency involving my child, and agree to assume full responsibility for all expenses, medical or otherwise, that may arise therefrom.

**Media Consent:** I hear by grant permission to Salt Lake County to use my or my children's photograph, videotaped image, quotes/comments, or name for publicity and educational purposes in any and all publications and media without limit or compensation.

**Name Posting:** Unless otherwise indicated below, Salt Lake County is authorized to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

I do not authorize Salt Lake County to post or publish the name of my child participating in Salt Lake County recreational activities on the Salt Lake County website.

By signing this assumption of risk, liability release, and refund policy statement, I acknowledge that I have read its contents and disclosure, that I understand its contents and disclosure, and that I agree to its terms. If any portion of this Agreement is held to be invalid by a court of law, then it is agreed and intended that all the remainder shall, notwithstanding, continue in full force and effect.

Name of Child Participant: \_\_\_\_\_

Signature (Parent (Legal Guardian) or Participant): \_\_\_\_\_ Date \_\_\_\_\_