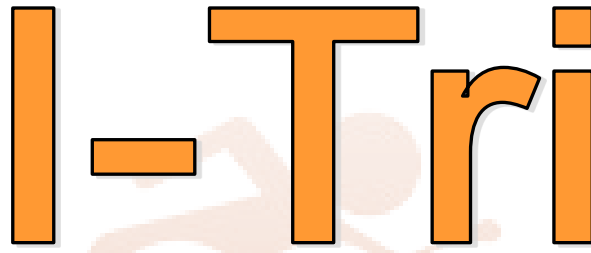


# J.L. Sorenson Recreation Center

## I-Tri



**Get ready for your next Triathlon!**

\$20.00 for a 4 week session. Each class is 45 mins.  
There will be a mock Tri the last week of every session

Our I-Tri program is a new way to look at fitness. Tired of the same old work out? Want to try something new and exciting? Then our I-Tri program is exactly what you are looking for. See complete session dates and times on the back. Sign up today! Space is limited!

### **Early Morning**

**6:30am-7:15am**

Monday Swim

Tuesday Run & Strength train

Thursday Cycle

### **Evening**

**8:00pm- 8:45pm**

Monday Swim

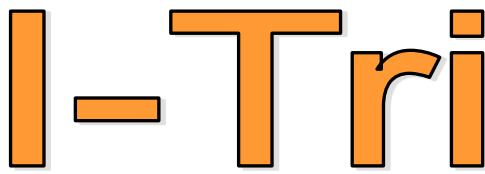
Tuesday Run & Strength train

Thursday Cycle



For inclusion opportunities for people with disabilities,  
contact Ashley at 385-468-1520 or [abowen@slco.org](mailto:abowen@slco.org).

Register in person at J.L. Sorenson Recreation Center, 5350 W Main Street / Online at [www.activityreg.com](http://www.activityreg.com)



Oct 2-26  Oct 30– Nov. 21  Nov. 27-Dec 21  Drop– In

**Early Morning**  
**6:30am-7:15am**  
**Monday Swim**  
Tuesday Run & Strength train  
**Thursday Cycle**

**Evening**  
**8:00pm– 8:45pm**  
**Monday Swim**  
Tuesday Run & Strength train  
**Thursday Cycle**

Name of Participant \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Parent or Guardian (if under 18) \_\_\_\_\_ Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
In Emergency Notify (other than parent / guardian) \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

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

- Release: I hereby recognize and acknowledge that my child’s/my participation in recreational activities may involve bodily injury and/or emotional injury to myself and/or my child. In consideration of my child/me being permitted to participate in such events, I for myself, my child, my heirs, my executors and administrators, hereby voluntarily and knowingly release, waive, and discharge Salt Lake County, its officers and employees from any and all liability except that caused solely by the negligence of Salt Lake County, that may result from my child’s participation in Parks & Recreation activities.
- Refund: 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. All refunds must be requested in person, accompanied with a written refund request. 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 to the Salt Lake County Attorney’s Office for collection. I understand that any account delinquent 30 days or more will be turned over to the Salt Lake Attorney for 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. I understand that I or my insurance company will be billed for such emergency treatment.
- Equal Opportunity: Salt Lake County Parks and Recreation provides equal opportunity to participate regardless of race, creed, gender, or ability to pay, and will upon request, provide reasonable accommodations to individuals with disabilities.
- 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.

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

1.



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

**OFFICE USE ONLY.....Receipt #:** \_\_\_\_\_ **Amt.:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **By:** \_\_\_\_\_