Wyalusing North Branch Triathlon

Saturday, Aug. 24, 2019

Race Information: wyalusingnorthbranchtriathlon.com
Pre-register at: www.active.com
Or mail completed registration form and signed waiver to:
Greater Wyalusing Chamber of Commerce,
PO Box 55, Wyalusing, PA 18853



COURSE INFORMATION

3.6 Mile Run

4.5 Mile Paddle on the Susquehanna River

9.4 Mile Bike Ride

GENERAL INFORMATION

Three-hour course limit.

Participants must be finished by noon.

First Place Winners receive a trophy.

Trophies Awarded to Overall Male and Female Winner.

Trophies Awarded to Overall Team.

Race Momento Awarded to Second and Third Place Finishers.

Headphones are prohibited during entire race event.

All bicyclists must wear helmets.

All paddlers must wear personal flotation devices.

Need to rent a Kayak? Call 570-746-9140. Rentals by Endless Mountain Outfitters.

EMO will have your kayak ready and waiting for you - no fuss, no muss.

SIGN UP INFORMATION

Pre-registration - up until Friday, Aug. 1

\$45 for individuals or \$35 for each team member, regardless of the number of team members.

-Pre-registered participants will receive a t-shirt-

Pre-registration is recommended as it guarantees you a t-shirt.

After Aug. 1/Day of Race:

\$50 for individuals and \$40 for team members.

After this date, t-shirts will be distributed on a first come - first served basis.

REGISTRATION DAY — RACE INFORMATION

Registration desk open at 7:30 a.m., near the race start, at the Wyalusing Valley High School-SR2010 11450 Wyalusing New Albany Road, Wyalusing, PA 18853

Registration closes at 8:30 a.m.

A pre-race briefing will be held at 8:45 a.m.

Race begins promptly at 9 a.m.

Day of the race entry fee: \$50 for individuals and \$40 per team members.

Limit of three people on a team. No tandem kayaks or bicycles.

Waiver and Liability Release must accompany payment.

Questions? Please email wyalusingchamber@gmail.com or call 570-746-4922

-Registration Form On Reverse-

The triathlon is sponsored by the Greater Wyalusing Chamber of Commerce (GWCC).

Financial support is received from area businesses and individuals

Release Must Be Signed Before Remittance

Wyalusing North Branch Triathlon Waiver and Liability Release.

I acknowledge that a triathlon or multi-sport event is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury and/or possible property loss. I hereby assume the risks of participating in Wyalusing North Branch Triathlon's 3.6 Mile Run along SR2010/SR187; a 4.5 Mile Paddle down the Susquehanna River and a 15.3 Mile Bike Ride on SR187/SR2010.

I certify that I am physically fit and have sufficiently trained for participation in this event and have not been advised against participating by a qualified health professional.

I assume all risks associated with participating in

these events including, but not limited to, the following: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, road conditions and traffic.

I acknowledge that my statements on the release are being accepted by the Greater Wyalusing Chamber of Commerce (GWCC) in consideration for allowing me to participate and by signing, I and anyone entitled to act on my behalf, waive and release GWCC, along with the various race sponsors, organizers, administrators and other groups assisting to put on the race, from all claims or liabilities of any kind arising out of my participation in the event.

Athlete's Signature	Date

For more information call the Greater Wyalusing Chamber of Commerce at 570-746-4922 or email: wyalusingchamber@gmail.com

ENTRY FORM		
Please circle the appropriate categories for you or your team.		
Male or Female		
19 and under 20-29 30-39 40-49 50-59 60-69 70+ (three places)		
Male Team Female Team Mixed Team (three places)		
Iron Man Iron Woman (overall winners) Complete this form and mail it along with your entry fee to: The Greater Wyalusing Chamber of Commerce, PO Box 55, Wyalusing, PA 18853		
Last Name———— Middle Initial ——— M or F		
First Name ————————————————————————————————————		
Street, PO Box		
City, State, ZiP		
E-Mail Address Phone		
Team Name		
Names of Team Members		
Maximum 3 members per team		
Payment Enclosed \$		
Teams: Please send in all team member's registration forms together.		
Circle Shirt Size: YOUTH: S, M or L MEN ADULT: Small Medium Large XXLarge		
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