

# 2010 KIDS

# TRIATHLON



## Coventry Wants Your Kids to Give It A TRI!

### 1st Annual Coventry Kids Triathlon (For Fun, Not Timed)

Sunday, September 5

Patriots Park Beach

124 Lake Street

Coventry, CT

9:00 a.m. registration. Event begins at 10:00 a.m.

**Pre-registration fee: \$5.00 Race day registration fee: \$10.00**

Non-residents welcome!

Ages 6-14

Distances are:

Ages 6-7: 25 yard swim, 1 mile bike, 1/4 mile run

Ages 8-9: 50 yard swim, 2 mile bike, 1/2 mile run

Ages 10-14: 100 yard swim, 4 mile bike, 1 mile run

**Please bring your bike (no training wheels), helmet, water bottle, swimsuit, swim goggles, sunscreen, towel, shorts, t-shirt, sneakers (that are good for running) and a healthy snack!**



To register, please fill out the form on the other side of this flyer or go to:  
[coventryct.org](http://coventryct.org)



**TEAM TRAINING**  
NEW ENGLAND **kids**  
[TeamTrainingNE.com](http://TeamTrainingNE.com)

# Coventry Parks & Recreation Program Registration Form

**PRIMARY HOUSEHOLD CONTACT/PARENT/GUARDIAN:**

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

HOME PHONE: (\_\_\_\_) \_\_\_\_\_

WORK PHONE: (\_\_\_\_) \_\_\_\_\_

CELL PHONE: (\_\_\_\_) \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

**3 EASY WAYS TO REGISTER:**



**MAIL IN:** Enclose a check or credit card information with registration form to: Coventry Recreation  
1712 Main Street  
Coventry, CT 06238



**FAX:** (860) 742-8911  
Include credit card information in space provided below.



**WALK IN:** Bring registration form & payment to Recreation Office,  
1<sup>st</sup> Floor, Town Hall.

**FOR OFFICE USE ONLY:**

Amount Paid: \_\_\_\_\_

Entered By: \_\_\_\_\_

Date: \_\_\_\_\_

Pmt Type:   Cash       CC

CHK: # \_\_\_\_\_

Receipt #: \_\_\_\_\_

ACTIVITY NUMBER CODE # & SESSION LETTER	PARTICIPANTS		DATE OF BIRTH	M/F	ACTIVITY NAME	TOTAL FEES
	FIRST NAME	LAST NAME				

**COMPLETE IF  
PAYING BY  
CREDIT  
CARD**

CC#: 

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AMT OF CHARGE: \$ \_\_\_\_\_ EXP. DATE: \_\_\_\_/\_\_\_\_  VISA  MC


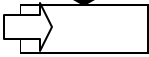

SIGNATURE AS IT APPEARS ON CARD: \_\_\_\_\_

NAME OF CARDHOLDER (printed): \_\_\_\_\_

TOTAL FEES:

**"Round Up" For Youth Recreation**

Rounding up your program fee, helps provide financial assistance for those unable to afford the program fee for youth activities.

TOTAL AMT:

**FORM NOT VALID UNLESS SIGNED HERE BY PARENT/GUARDIAN/ADULT PARTICIPANT:**

Participation in this program may involve risk of injury. As a parent, guardian, or participant, I am aware of these hazards and my ability to participate. In consideration for participation in the program(s) listed above, I hereby for myself, my heirs, executors and administrators waive and release any and all claims of damage against the Town of Coventry, its successors and assigns, employees, agents, and representatives for any and all kinds of injury, including but not limited to personal injury and/or property damage suffered by my child, or myself, or my ward, while participating in this activity. In addition, I give my permission for the child(ren) to be treated by qualified medical personnel in the event that the above named parent/guardian can not be reached at the phone numbers above.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

