

Race Date:

Start Time:

North Douglas Duathlon

Saturday June 07 2014

09:00AM (Registration 08:15AM)

	North Douglas outer point large pull out. (Picnic cove)		
Race Contact:	Tracy Rivera tracyrivera0@gmail.com		
join JTRR https://southeastroadrunners.org/	results online: https://jtrr.org/eve	ent/2014/race/127	
Course Description:			
June 7 @ 9a.m. 5K run, 9 mile bike, 5K run			
<u>Distance</u> ☐Leg 1 5K run (3.11 miles)	ENTRY		
Leg 2 9 Mile Bike and T1 (8.89		ENTRYFEES	
miles)	FORM	Kids 18 & Under - \$0	
\square Leg 3 5K run and T2 (3.17 miles)		Adults Day of Race - \$0	
□volunteer - \$0		4 3	
Last Name	First Name		
GENDER CIRCLE ONE (Male Female Non-Binar			
email			
MAILING ADDRESS			
STREET OR BOX			
CITY	PHONE		
STATE	ZIP		
WAIVER: I know that running or volunteering to work in this race is a potentially hazi trained, and by my signature, I certify that I am medically able to perform this event, a participation in this event, including the right of any official to deny or suspend my per all risks associated with running or volunteering in this event, including but not lim volunteers, race personnel, contract service providers, employees, and spectators. I the conditions of the road and/or trail including surrounding terrain. I understand the and I will abide by all race rules. If allowed by the Race Director, and if I am pushi jogger or stroller. Having read this waiver and knowing these facts and inconsider and Road Runners, the United States Forest Service, the state of Alaska, the C successors from all claims or liabilities of any kind arising out of my participation in this waiver. In addition, I acknowledge the contagious nature of communicable dise this event. I acknowledge that such exposure or infection may result in personal injupictures, recordings or anyother record of this event for any legitimate purposes. I u that I am not entitled to a refund if the event is canceled before or during the event	ardous activity which could cause injury or death. I will not er am in good health, and am properly trained. I agree to abide I urticipation for any reason whatsoever. I attest that I have reac itied to: falls, physical contact with and/or the potential contr assume all risks including: the effects of the weather; high I at bicycles, skateboards, roller skates or inline skates, anime ng a baby jogger or stroller, I also accept the responsibility attion of your accepting my entry I, for myself and anyone entit city and Borough of Juneau, and the Road Runners Club in this event, even though that liability may arise out of neglig asses and voluntarily assume the risk that I may be exposed to rry illness, permanent disability, and/or death. I grant permis	by any decision of a race official relative to any aspect of my if the rules of the race and agree to abide by them. I assume action of a communicable disease from other participants, neat and/or humidity, freezing cold temperatures; traffic and als, and personal music players are not allowed in the race, y for injury up to death of the child being transported in the led to act on my behalf, waive and release the Juneau Trail of America, all event sponsors, their representatives and lence or carelessness on the part of the persons named in o or infected by communicable diseases by participating in sion to all of the foregoing to use my photographs, motion	
CICALATURE	BIB NUMBER:		
SIGNATURE	(for race officials only)		
SIGNATURE of parent or guardian if	under 18 DATE		