

# Tri-Peachtree City Membership Application

Date \_\_\_\_\_ Membership for Year \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Email Address \_\_\_\_\_

Membership Category: Individual \_\_\_\_\_ (\$25) Family \_\_\_\_\_ (\$25 + \$6 per additional member)

	Name	Sex	Birth Date	USAT Member Number	USAT Member Expiration Date
Primary Member					
Additional Family					
Additional Family					
Additional Family					
Additional Family					
Additional Family					

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Membership is good from January 1 through December 31

Make checks payable to **Tri-PTC, Inc.**

Mail form and check to:

Tri-PTC, Inc.  
P.O. Box 3285  
Peachtree City, GA 30269

*All members must sign the AWRL form on the next page. Membership is not valid without signature of all family members.*

**PLEASE READ THIS DOCUMENT (THE "WAIVER AGREEMENT") CAREFULLY BEFORE SIGNING. THIS WAIVER AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS AND WILL LIMIT OR ELIMINATE YOUR ABILITY TO BRING A FUTURE LAWSUIT.**

I understand and acknowledge that I am legally agreeing to the statements in the following paragraphs of this Waiver Agreement by affixing my signature below and that these statements are being accepted by USA Triathlon ("USAT") in consideration for (i) allowing me to become a member of USAT, (ii) issuing me a single event license or permit, and/or (iii) permitting me to participate in any USAT sanctioned event; and I further understand and acknowledge that my statements are being relied upon by the various race sponsors, organizers, administrators, volunteers and other parties defined below as the "Released Parties."

1. I acknowledge that a triathlon, duathlon, or other multi-sport event (hereinafter an "Event") is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property damage. I acknowledge and agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to safely participate in an Event, and I attest and certify that I am or will be sufficiently fit and physically trained to participate in any Event which I elect to enter, and that I have conferred with a medical doctor who has agreed to my participation in the Event.

2. On behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, and anyone else who might attempt to sue on my behalf, I HEREBY WAIVE, RELEASE, and FOREVER DISCHARGE USA Triathlon, all Event sponsors, Event producers, Event staff, administrators, officials, contractors, vendors, and organizers (including race directors), volunteers, all other persons or entities involved with the Event, states, cities, towns, and other governmental bodies and locations in which Events or portions of Events take place, and the officers, directors, employees, agents, insurers, and representatives of all of the above (collectively, the "Released Parties"), from any and all claims, causes of action, damages, losses (economic and non-economic), and liabilities of every kind (collectively "claims"), for death, personal injury, or property damage, which may arise out of, result from, or relate to my participation in, or my traveling to or from, any USAT sanctioned Event, including but not limited to any claims for theft, damage to any equipment, negligence, partial or permanent disability, claims relating to the provision of first aid, medical care, medical treatment, or medical decisions (at the Event site or elsewhere), and any claims for medical or hospital expenses.

3. I acknowledge and ASSUME ALL OF THE RISKS of running, bicycling, swimming, and participating in all other sports and aspects of any Event in which I decide to participate (collectively, "risks"). I acknowledge that these risks may include dangerous conditions and exposure to potential physical injury or even death resulting from, among other things, vehicles or persons on the race course, falls, contact or encounters with other participants, staff, officials, contractors, vendors, volunteers and spectators, the effects of weather including heat, cold, and humidity, defective equipment, dangerous conditions on the roads or in the water, contact with other swimmers, boats, and other man-made and natural hazards in the water. By signing below, I understand that I will be participating in all aspects of the Event at my own risk, that it is ultimately my responsibility to risk participation in the Event, including but not limited to swimming in any open body of water, and that I am waiving and releasing my legal rights to sue for any injury or damages arising out of or resulting from all such risks. I further understand that these risks may be the result of negligence or carelessness on the part of persons or entities defined above as released Parties.

4. I FURTHER COVENANT and AGREE NOT TO SUE any of the Released Parties for any of the claims that I have waived, released, or discharged herein. I AGREE TO INDEMNIFY and HOLD HARMLESS the Released Parties from any and all expenses incurred, claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, my breach or failure to abide by any part of this Waiver Agreement, my breach or failure to abide by any of USAT's Competitive Rules, and my actions or inactions which cause injury or damage to any other person.

5. I AGREE to abide by the Competitive Rules adopted by USAT, including the Doping Control Rules, as they may be amended from time to time. I AGREE that prior to participating in an Event I will inspect the race course, facilities, equipment, and areas to be used, and if I believe or become aware that any are unsafe, I will immediately advise the person supervising the Event. I FURTHER GRANT to the Event organizers, USAT, and their licensees the right, permission, and authority to use my name, voice, picture, or photograph, in any broadcast, telecast, commercial advertisement, promotion, or other account of the Event, and I WAIVE any rights to future compensation to which I might otherwise have been entitled for such use.

6. Any person signing below on behalf of a minor under the age of 18, hereby acknowledges that he or she has the legal capacity and authority to act on behalf of the minor and to legally bind the minor to this Waiver Agreement, and they agree to indemnify and hold harmless the Released Parties for any expenses incurred, claims made, or liabilities assessed against them, as a result of any insufficiency of legal capacity or authority to act on behalf of the minor in the execution of this Waiver Agreement.

**ATHLETE or PARTICIPANT**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

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

**(Parent or Legal Guardian for Athletes under Eighteen (18) Years of Age)**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Relationship to Minor \_\_\_\_\_ Date \_\_\_\_\_

**ATHLETE or PARTICIPANT**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

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

**(Parent or Legal Guardian for Athletes under Eighteen (18) Years of Age)**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

Relationship to Minor \_\_\_\_\_ Date \_\_\_\_\_

**ATHLETE or PARTICIPANT**

Print Name \_\_\_\_\_ Signature \_\_\_\_\_

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

**(Parent or Legal Guardian for Athletes under Eighteen (18) Years of Age)**

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Relationship to Minor \_\_\_\_\_ Date \_\_\_\_\_

**ATHLETE or PARTICIPANT**

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Relationship to Minor \_\_\_\_\_ Date \_\_\_\_\_