IRONMAN 70.3® LAKE STEVENS WASHINGTON

August 15, 2010 - Start Time: 6:30am - Lake Stevens, Washington

1 Last Name

2 First Name

3 Birthdate (M M / D D / Y Y)

4 Age

5 Sex (M F)

For Office Use Only

6 Address

7 City

8 State

9 Postal Code

10 Country

11 Phone (Day)

12 Division: E Elite; AG Age Group; C/A Clydesdale/Athena; MT Male Team; FT Female Team; XT Mixed Team; PT Para Triathlete

13 Phone (Night)

18 Email - race updates are given through email

14 Emergency Contact Last Name

15 Emergency Contact Phone

16 Emergency Contact First Name

17 Emergency Contact Relationship

Team members must complete separate applications, submit them together, and pay one team registration fee. All team members must be current USA Triathlon members or pay a $10 one-day fee per non-USAT member.

19a Teammate #2

21a Teammate #2 Leg (swim, bike or run)

19b Teammate #3

21b Teammate #3 Leg (swim, bike or run)

19c Team Name

20 T-Shirt: S M L XL 2X

22 USAT Member #

Membership card and photo ID **MUST** be presented at packet pick-up

I understand all entries are final, with **NO REFUND**, and that the race organizers reserve the right in the event of an emergency or local or national disaster to cancel the race, or to change the day/time of the event and that there is **NO REFUND** of entry fees. I also understand that mailing in an entry form does not guarantee an entry to the race and that this race can sell out at any time. The race organization reserves the right to return any race entry that is mailed in after the race is sold out. I understand that there will be no race morning packet pickup. I also understand that I must be present with a photo ID to pick up my own packet and any relay teammates, if applicable, must bepresent to pick up their own packet. If I do not provide a valid email address, I understand that I will not receive race-specific updates but am subject to all race rules, policies and procedures.

Signature: *Parent or legal guardian's signature required if entrant is under 18* _____ **Date:** _____

19 Entry Fees and Payment Method

	Late (1.2.10 - 7.31.10)	Pre- Race (Expo)	
USAT One Day fee	$10	$10	
70.3 Individual	$225	$275	
70.3 Team	$250	$300	
70.3 Pro	$0	$0	

Must be postmarked by July 31, 2010 to receive the late rate

Make check payable and mail to:
Premier Event Management
P.O. Box 10427
Harahan, LA 70181

Total Payment / Credit Card Charge _____

Payment Method

☐ Check Enclosed

☐ VISA ☐ MASTERCARD

Card#: Please Print Legibly

CVV #:

This 3 digit number can be found on the back of your card or the 4 digits found on the front of your card.

Credit Card Entries not accepted via Fax!

Exp. Date: /

Cardholders Name

Signature

NO REFUNDS! NO TRANSFERS! NO DEFERRALS!