

# Playtri

## 2009 Playtri Louisville Triathlon Camp

### Registration Form – Louisville Camp

First and Last Name \_\_\_\_\_.

Phone \_\_\_\_\_ Email \_\_\_\_\_.

Street \_\_\_\_\_.

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

Sex M \_\_\_ F \_\_\_ DOB (mm/dd/yy) \_\_\_\_\_.

USAT # \_\_\_\_\_ T-shirt : S \_\_\_ M \_\_\_ L \_\_\_ XL \_\_\_ XXL \_\_\_.

What is your triathlon and Ironman background?

What triathlon events did you complete in the 2008 season and what were your times?

Do you have any injuries or medical conditions?

What do you expect to learn at this camp?