

**Playtri Off-Season Triathlon Camp**  
**2010 REGISTRATION FORM**

Coach David Bertrand and Playtri present an Off-Season Camp.  
 Participants will have the opportunity to properly prepare for the off-season through three focused sessions.

First Name	<input type="text"/>																				Gender
	<input type="text"/>																				<input type="checkbox"/>
Last Name	<input type="text"/>																				
	<input type="text"/>																				
Address – Street Name – Apt. No.	<input type="text"/>																				
	<input type="text"/>																				
City	<input type="text"/>																				
	<input type="text"/>																				
State	Zip Code	Home Phone Number																			
<input type="text"/>	<input type="text"/>	( <input type="text"/> ) <input type="text"/> - <input type="text"/>																			
Date of Birth	Age	Mobile Phone Number																			
<input type="text"/>	<input type="text"/>	( <input type="text"/> ) <input type="text"/> - <input type="text"/>																			
Emergency Contact (Name & Phone Number)																					
<input type="text"/>																					

Current Activity Level – please describe your weekly activity and training involvement.

Swimming – what is your experience level in the sport of swimming (open water and pool work)?

Limitations – let me know if you have any limitations that might prevent you from participating in some training and racing activities

Height	Weight
<input type="text"/>	<input type="text"/>

E-mail Address

**Waiver and Release**

In consideration of the acceptance into the Playtri Off-Season Camp, I, the undersigned, intending to be legally bound for myself, my heirs, my executors, administrators, and assignees, waive release and forever discharge David Bertrand and Playtri and its officers and members and any sponsor of the club, for all the rights and claims of damages, demands, actions, whatsoever in any manners arising out of my participation in the activities of Playtri and the Off-Season Camp.

Signature

Date

Signature of Parent or Guardian (if under age 18)

Date

	Off Season Prgm (10/31, 11/14, 11/28)		
	Postmarked by:		
	Until 9/15/2010	Until 10/15/2010	Until 10/31/2010
<b>Fee</b>	\$79	\$99	\$119

Eligibility - The minimum age to participate is 13. The right to accept or reject any entry is reserved.

Payment Total	Type	Date Paid
\$_____	<input type="checkbox"/> Cash <input type="checkbox"/> - <input type="checkbox"/> Check <input type="checkbox"/>	<input type="text"/> M <input type="text"/> M <input type="text"/> D <input type="text"/> D <input type="text"/> Y <input type="text"/> Y

**Please make checks payable to “David Bertrand”.**

**Return completed forms to:** David Bertrand  
P.O. Box 750353  
Dallas, TX 75275  
(Please finish registrations by October 31, 2010)

If you have any further questions, please do not hesitate to contact Coach David Bertrand at [david@playtri.com](mailto:david@playtri.com)