



**Sprint Triathlon**  
3.1 mile run, 8 mile bike, 175 yard pool swim

**5K Run**  
3.1 mile run

**Kids Run**  
0.5 mile run

# ENTRY FORM

January 28, 2018



Office use only

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One entry per form. This form may be photocopied. Please print legibly and USE BLUE OR BLACK INK ONLY.

FIRST NAME

LAST NAME

AGE ON RACE DAY  AGE ON 12/31/18  DATE OF BIRTH  /  /

USAT #  SEX:  M  F

STREET ADDRESS

CITY

STATE  ZIP

DAY PHONE  -  -

EMAIL ADDRESS

*I am registering for: (check one only)*

- Sprint Triathlon (Ages 15+ as of 12/31/2018)
- Triathlon Relay
- Youth Sprint Triathlon (Age 11-14 and under as of 12/31/2018)
- 5K Run (Age 15+ as of 1/29/2018)
- Youth 5K Run (Age 14 and under as of 1/29/2018)
- Kids Run (Age 4-12)

**ENTRY FEES (Make checks payable to Renegade Racing)**

	Early Bird	By 8/31	By 10/31	By 12/31
<b>Sprint Triathlon (Ages 15+)</b>	\$69	\$79	\$89	\$99 \$ _____
<b>Youth Triathlon (Age 11-14)</b>	\$39	\$44	\$49	\$54 \$ _____
<b>Sprint Relay</b>	\$99	\$119	\$134	\$149 \$ _____
<b>5K Run - Adult (Ages 15+)</b>	\$27	\$32	\$37	\$42 \$ _____
<b>Youth 5K Run (Age 14 and under)</b>	\$19	\$24	\$29	\$34 \$ _____
<b>Kids Run (Age 4-12)</b>	\$12	\$14	\$18	\$22 \$ _____

**USAT 1-Day License (Triathlon only)**

- TRIATHLON \$15
- RELAY \$15/per person
- YOUTH (17 AND UNDER) \$10

**TOTAL AMOUNT ENCLOSED** \$ \_\_\_\_\_

Visa  MC  Am Ex

Billing Zip Code  CVV Number

Credit Card # \_\_\_\_\_

Exp. Date \_\_\_\_\_

Signature \_\_\_\_\_

**WAIVER**

By checking the box I agree to the terms within the USAT waiver. Copies of the waiver can be found on [www.usatriathlon.org](http://www.usatriathlon.org) or by calling Renegade Racing at (949) 975-1812 for a mailed or faxed copy.

Signature of Participant (Signature of Parent or Guardian if under 18) \_\_\_\_\_ Date \_\_\_\_\_

**RACE DAY EMERGENCY CONTACT**

Name (Please Print) \_\_\_\_\_ Phone \_\_\_\_\_

**ENTRY FEES ARE NON-REFUNDABLE AND NON-TRANSFERABLE. RACES HELD RAIN OR SHINE.**

**MAIL TO:**  
22600-C Lambert Street, Suite 910, Lake Forest, CA 92630  
949-975-1812 PHONE • 949-975-1814 FAX

**RENEGADE RACE SERIES**  
[WWW.RENEGADERACESERIES.COM](http://WWW.RENEGADERACESERIES.COM)

T-Shirt Size  S  M  L  XL  XXL  Child M  Child S

**For Relay Teams:** Captain fills out registration form above, list names and email addresses of teammates below.

**Relay Category:** (Check one)  MALE  FEMALE  MIXED

TEAM NAME

TEAMMATE 1

FIRST NAME  Check one:  SWIM  BIKE  RUN

LAST NAME

EMAIL ADDRESS

USAT #  AGE ON 12/31/18

T-Shirt Size  S  M  L  XL  XXL  Child M  Child S

TEAMMATE 2

FIRST NAME  Check one:  SWIM  BIKE  RUN

LAST NAME

EMAIL ADDRESS

USAT #  AGE ON 12/31/18

T-Shirt Size  S  M  L  XL  XXL  Child M  Child S