

ENTRY FORM

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

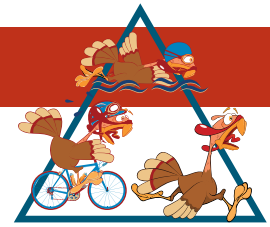
Office use only

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San Dimas Turkey Trot
RENEGADE RACE SERIES

Saturday, November 18, 2017



San Dimas Turkey Tri
RENEGADE RACE SERIES

Sunday, November 19, 2017

Division (TRIATHLON ONLY):

AGE GROUP ATHENA (women 150 lbs. +) CLYDESDALE (men 200 lbs. +)

T-Shirt Size: S M L XL XXL CHILD'S MEDIUM

Entry Fees: (Make checks payable to Renegade Racing)

	UNTIL 5/31	UNTIL 7/31	UNTIL 9/30	UNTIL 10/31	AFTER 10/31	
San Dimas Turkey Trot 10K	\$30	\$33	\$37	\$40	\$43	\$ _____
San Dimas Turkey Trot 5K	\$27	\$30	\$32	\$35	\$39	\$ _____
Kids Trot	\$12	\$15	\$17	\$20	\$23	\$ _____
Turkey Tri INDIVIDUAL	\$90	\$100	\$110	\$120	\$130	\$ _____
Turkey Tri 3-PERSON RELAY TEAM	\$105	\$130	\$150	\$170	\$190	\$ _____
Pumpkin Pie Kids Duathlon	\$30	\$33	\$36	\$39	\$42	\$ _____

USAT 1-Day License (TRIATHLON & DUATHLON ONLY)

TRIATHLON \$15 RELAY \$15/per person YOUTH \$10 \$ _____

TOTAL AMOUNT ENCLOSED \$ _____

* If available

Visa MC Am Ex

Billing Zip Code

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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 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

FIRST NAME

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LAST NAME

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AGE ON RACE DAY

		AGE ON 12/31/17			DATE OF BIRTH			/			/		
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USAT #

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SEX: M F

STREET ADDRESS

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DAY PHONE

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EMAIL ADDRESS

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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

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FIRST NAME

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LAST NAME

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EMAIL ADDRESS

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AGE ON 12/31/17

		DATE OF BIRTH			/			/		
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USAT #

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T-Shirt Size: S M L XL XXL

FIRST NAME

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LAST NAME

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EMAIL ADDRESS

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AGE ON 12/31/17

		DATE OF BIRTH			/			/		
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USAT #

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T-Shirt Size: S M L XL XXL

