

SWIM – BIKE – RUN RACE FOR KIDS AGE 5 TO 17

Sunday June 13, 2010 8:00 a.m.

University of Lethbridge

Max Bell Aquatic Centre

Individuals and TEAMS Welcome

Entry LIMIT 300 Athletes Entry deadline: June 5th, 2010



Alberta Triathlon Sanctioned Event #ATA 2010

ITU, Triathlon Canada and Alberta Triathlon rules and regulations will be in effect.



Mandatory Pre-Race Meeting Saturday June 12th at 6:00 p.m.
SHARP next to Tim Horton's 1st Choice Savings Ctr. University
Lethbridge - Race packages will be handed out at this meeting!
YOU MUST ATTEND!

We need volunteers – parents give us a call.



DEVON KUTSCH ORTHODONTICS
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715 - 2 Avenue South, Lethbridge, Alberta T1J 0C4



SUN DENTAL GROUP
Dr. Kevin Kindley & Dr. Gary Fong

Please Note: age group and race distances have changed to comply with Alberta Triathlon and Triathlon Canada race rules. **Age is now determined as of December 31 during the year of competition.** For example, even if an athlete is 11 on race day, but will turn 12 prior to year-end, the athlete must race as a 12 year old. The same rules apply for teams. The age category/distance for a team will be based on the oldest team member's age.

Age	Swim	Bike	Run
7 and under	50m	2.5km	1km
8 to 9	100m	2.5km	1km
10 to 11	100m	5km	1km
12 to 13	250m	10km	2km
14 to 15	300m	10km	3km
16 to 17	500m	10km	4km

Entry Fee: Individual \$20.00 / Team of two \$40.00 /
Team of three \$60.00

*Alberta Triathlon Members \$18.00 per member

*Must be a current and valid ATA member at time of registration and race day. ATA members must present membership card at race package pickup.

Entry fees are 100% NON-REFUNDABLE - SORRY.

Entry fee includes a really cool KOS t-shirt and awards presentation!

Lots of great prizes! (you must be there to win)

HELMETS MUST BE WORN AND MUST BE SNELL OR CSA APPROVED

Bike & Helmet check: Bike mechanical safety and having an approved bike helmet is the responsibility of each individual participant.

Questions? Call Terry 381-1874 , Mel 381-2354 or Susan 380-6096 or check our web site at
www.lethbridgekidsofsteel.com



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★ **We need volunteers - please give us a call** ★

★ 2010 KIDS OF STEEL OFFICIAL ENTRY FORM – WELCOME ATHLETES! ★

Keep this TOP portion of the entry form for future reference! www.lethbridgekidsofsteel.com

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• Bike & Helmet check: Bike mechanical safety and having an approved bike helmet is the responsibility of each individual participant.

From here down is THE ENTRY FORM WHICH MUST BE SENT IN - please PRINT clearly!!!

Entries to be received by May 30th, 2009 Please make cheques payable to "Lethbridge Kids of Steel" & send or drop off to: c/o Melanie Vegter 22 Niska Place West T1K 6G9

Entry Fee: Individual \$20.00 / *Alberta Triathlon Members \$18.00 per member

INDIVIDUAL ENTRY HERE Please check which shirt size you want: Youth M L or Adult S M L

What is the name of your school? _____

Last name _____ First name _____
Address _____ City _____ Province _____ Postal Code _____
Phone# _____ Sex M F Age as of Dec. 31, 2010 _____
Estimated swim time for your distance (we really need this!) _____ ATA# exp. date _____

PRINT CLEARLY - PRINT CLEARLY - PRINT CLEARLY - PRINT CLEARLY - PRINT CLEARLY - PRINT CLEARLY

Entry Fee: Team of two \$40.00 / Team of three \$60.00

TEAM ENTRY HERE Please check your shirt size BESIDE YOUR NAME (YOUTH & ADULT SIZES)

SWIMMER INFO -Last name _____ First name _____ Youth M L or Adult S M L
Estimated swim time for your distance (we really need this!) _____ Age as of Dec. 31, 2010 _____ Sex M F

BIKER INFO - Last name _____ First name _____ Youth M L or Adult S M L
Age as of Dec. 31, 2010 _____ Sex M F

RUNNER INFO - Last name _____ First name _____ Youth M L or Adult S M L
Age as of Dec. 31, 2010 _____ Sex M F

Parent Team Contact name (MANDATORY) _____

Address _____ City _____ Province _____ Postal Code _____

Phone# _____

ACKNOWLEDGMENT OF RISK - PLEASE READ CAREFULLY AND SIGN:

I acknowledge that participation in the sport of triathlon might result in personal injury to my self due to the endurance nature of the sport and the inherent risks associated with swimming, biking and running, especially on public roads. I accept these risks. In consideration of my participation in Alberta Triathlon Association sanctioned event and training, I agree that the Lethbridge Kids of Steel Triathlon, Alberta Triathlon Association, it's directors, officers, employees, coaches, volunteers, and agents shall not be liable for any personal injury or loss I might suffer from any such participation, unless such loss shall be caused by the negligence of any one or more of the above named whilst acting within the scope of their duties. Personal information gathered is solely for the purpose of communicating ATA related material. (ie: race notification, coupon savings, and any other related material). This information will never be given or sold to any other organization including ATA and Lethbridge Kids of Steel sponsors. If you do not wish to receive ATA material please check here. 1

*As parent of the above-named child, I agree to my child participating in the sport of triathlon and have instructed my child of the risks involved and to be safety conscious.

Childs Name _____ Date _____ *Signature of Parent or Guardian _____

2nd Team Member Childs Name _____ Date _____ *Signature of Parent or Guardian _____

3rd Team Member Childs Name _____ Date _____ *Signature of Parent or Guardian _____

Medical Questionnaire - please indicate child's name! The following information is necessary for the event medical staff to ensure proper care in the event of accident or illness during the race.

- 1. Does your child have any current or recurrent problems for which a doctor is treating them? _____
2. Is your child on any medication? Yes / No If yes what type? _____
3. Is your child allergic to any medications? Yes/ No if yes what type? _____
4. Is your child hypersensitive to insect stings? Yes / No
5. Do you wish the medical personnel of the race to be aware of any specific medical problems? If yes, please specify _____

★ We need volunteers! Your Name _____ Phone # _____ ★