



Membership Agreement & Waiver Form

The Lakes Region Triathlon Club (LRTC) is a 501(c)(3) non-profit voluntary club registered with USA Triathlon and is based in Belknap County, in the lakes region of New Hampshire.

By signing below, I _____
(print full name)

agree to abide by the LRTC By-Laws and Rules and Regulations, and that the information listed below applies to being a Member of the LRTC. I agree to the following terms of my membership:

1. The 2019 annual membership is valid from November 1, 2018 through October 31, 2019.
2. LRTC is a registered USA Triathlon club. My membership in LRTC does NOT automatically register me as a member of USAT. If I decide to become a member of USAT, I must do so on my own at www.usatriathlon.org
3. **Trainings/Clinics:**
 - All trainings are listed on the LRTC website. www.lakesregiontriclub.com
 - Most trainings are free to members; however, some may include an additional, nominal fee.
 - I am not required to attend trainings/clinics. I attend them on a voluntary basis.
 - I am responsible for signing up for trainings/clinics by a certain specified date, unless otherwise noted.
 - Some of the trainings are open to non LRTC members for a fee. If I wish to invite a non LRTC member friend to any LRTC training, they are subject to paying a guest fee.
4. **The annual membership dues structure for 2019 is as follows:**
 - Dues are \$230 for individuals (age 16+) and \$420 for couples.
 - Dues for youths (ages 10-15) are \$125.
5. **Ability to Swim:** In order to participate in the LRTC swim training sessions, I understand that I must be able to comfortably swim 300 yards without stopping.
6. **Club Uniform:** In order to show support for LRTC sponsors, I understand that I am encouraged to wear the LRTC uniform in races in which I participate.

LRTC RELEASE AND WAIVER:

In consideration of participating in activities of the Lakes Region Triathlon Club (LRTC), I represent that I understand the nature of this activity and that I am qualified, in good health, and in proper physical condition to participate in such activities as offered by LRTC.

I acknowledge that before I engage in any activities of a physical nature, that I should consult my physician prior to doing so. I acknowledge that if I believe event conditions to be unsafe, I will immediately discontinue participation in the activity.

I fully understand that activities offered by LRTC involve risks of serious bodily injury, including permanent disability, paralysis and death, which may be caused by my own actions, or inactions, those of others participating in the event, the conditions in which the event takes place, or the negligence of the "releasees" named below; and that there may be other risks either not known to me or not readily foreseeable at this time; and I fully accept and assume all such risks and all responsibility for losses, costs, and damages I incur as a result of my participation in activities offered by LRTC.

I hereby release, discharge and covenant not to sue Lakes Region Triathlon Club, Breakaway Athletic Coaching, The Downtown Gym, Colby-Sawyer College, Plymouth State University, each of their respective administrators, directors, agents, officers, volunteers, and employees, other participants, any sponsors, advertisers, and if applicable, owners and lessors of premises on which the activity takes place, (each considered one of the "releasees" herein) from all liability, claims, demands, losses or damages on my account caused or alleged to be caused in whole or in part by the negligence of the releasees or otherwise, including negligent rescue operations; and I further agree that if, despite this release, waiver of liability and assumption of risk, I, or anyone on my behalf, makes a claim against any of the releasees, I will indemnify, save, and hold harmless each of the releasees from any loss, liability, damage, or cost which I may incur as the result of such claim.

I have read this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT, understand that I have given up substantial rights by signing it and have signed it freely and without any inducement or assurance of any nature and intend it be a complete and unconditional release of all liability to the greatest extent allowed by law and agree that if any portion of this agreement is held to be invalid the balance, notwithstanding, shall continue in full force and effect.

Signed: _____ Date: _____

For minors under 18, signature of parent or guardian required:

Signed: _____ Date: _____

Parent/Guardian for: _____

LRTC INFORMATION SHEET

Name: _____

Mailing Address: _____

CONTACT INFO: Circle which is best way to contact you

Email: _____

Home or Work Phone: _____

Cell: _____ Texting: Yes No

RACING/CLUB ROSTER INFO:

USAT#: _____

Date Of Birth (please include year): _____

Male: _____ Female: _____

TEE SHIRT INFO:

Ladies: Please provide a size for both types of tee shirts.

Unisex tee shirt size: _____

Women's cut tee shirt size: _____