

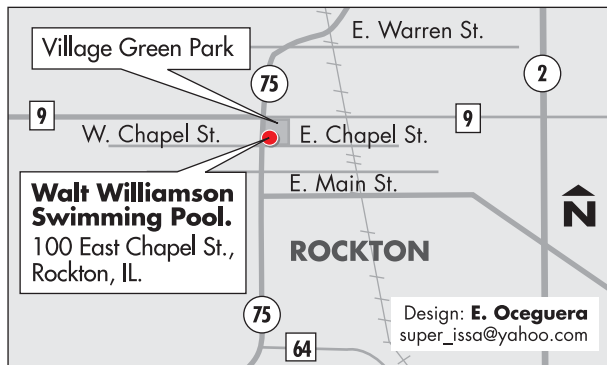
IMPORTANT INFORMATION

- **No refunds** — rain or shine.
- Packet pick up and race day registration will be from 6:00 am to 7:30 am on race day
- Entry closes after 200 participants
- Participants registering on race day will begin after the last swimmer exits the pool
- Results will also be on our website at: www.rockfordroadrunners.org
- Post race ceremony will include food, beverage, awards, and door prizes. Awards ceremony will begin 5 minutes after the last participant finishes
- Proceeds from the race will benefit the Rockton HUT Children's Day Camp Organization
- **Helmets mandatory** — Automatic disqualification without helmet
- No drafting
- Bike racks will be provided in the transition area
- All cyclists must stay on the right side of the road at all times.
- All roads will be open to traffic throughout the race.
- All bikers must start and finish in the transition area.
- Shower facilities will be provided
- Every pre-registered participant is guaranteed an official event T-Shirt

DIRECTIONS

From I-90 traveling north or south, exit west onto Rockton road traveling approximately 4 miles and turn left on Green street. **Williamson Pool** will be on intersection of Rockton road and Green street.

No parking at the fire station parking lot



Shosie's Cyclery
514 Windsor Rd.
Loves Park, IL. 61111

Postage
Required
Post Office will
not deliver
without proper
postage.

ROCKTON TRIATHLON

Saturday June 21, 2008 8:00 am



- **300 YARD SWIM**
- **15 MILE BIKE**
- **3 MILE RUN**

Walt Williamson Swimming Pool
100 East Chapel Street, Rockton, IL.
www.rockfordroadrunners.org

“LIVE THE EMOTION, FREE YOUR SPIRIT...”



Team name and name of teammates:

Signature _____ Date _____

Gender: Male Female

Teammate signature _____ Date _____

Gender: Male Female

Teammate signature _____ Date _____

Gender: Male Female

Parent/Guardian signature (required for entrants under 18 yrs old) _____ Date _____

Address: _____ **City:** _____

State: _____ **Zip Code:** _____

Phone: () _____

DOB (Month/Day/Year): _____

Age on the race day: _____

Estimated 300 yard swim time: _____

MAIL ENTRY FORM TO:

Rockton Triathlon, Shosie's Cyclery
514 Windsor Rd.
Loves Park, IL. 61111

**MAKE CHECK PAYABLE TO:
Lickity Splits Triathlon Club**

Age group (Check one):

- 10-18 19-24 25-29 30-34
 35-39 40-44 45-49 50-54
 55-59 60+

Team (Check one):

- High School Male Female Co-Ed

Technical T-Shirt size (Check one):

- Small Medium Large X-Large

e-mail: _____

WAIVER*

I (we) hereby by myself (ourselves), my (our) heirs, executors, and administrators, fully and forever waive, release, discharge and promise not to sue any of the race officials and volunteers, the Village of Rockton, any municipal agencies, Lickity Splits Triathlon Club, Lickity Splits Rockton Triathlon, sponsors or co-sponsors, any personnel assisting in the race, or any person connected with this event their employees and/or property, representatives successors and assigns, from any all claims or liability for death or for damages for any and all injuries

to me or my property arising out of or in connection with my participation in this event. The athlete is fully aware of any risks and hazards involved in participating in this triathlon and hereby agrees to compete voluntarily. The athlete hereby grants permission to the medical staff, access to all medical records as needed and authorizes medical treatment as needed.

Finally, I (we) hereby grant by irrevocable permission to any sponsors and/or organizers and its authorized agents, to use my name and any photographs, video-

tapes, or other records of my participation in this event for any purpose without compensation.

Signature participant 1 _____

Signature participant 2 _____

Signature participant 3 _____

Please cut along dotted line, fill the form and mail it to the address provided



June 21, 2008 — 8:00 AM

LOCATION:

Walt Williamson Swimming Pool. 100 East Chapel Street, Rockton, IL.

START TIME

First Swimmer starts at 8:00 AM sharp. 20 seconds interval per swimmer afterwards. The fastest pre-registered swimmer will start first.

ENTRY FEE

\$40.00 Individual received by June 7th, 2008.

\$50.00 Individual received after June 7th

\$55.00 Per team (2 to 3 person team) by June 7th, 2008.

\$65.00 Per team (2 to 3 person team) after June 7th.

Online registration powered by Active.com

Online registration closes June 14th, 2008.

All registrations must be postmarked by June 14th, 2008.

AWARDS

Special awards to overalls Male, Female and Team.

First Place finishers:

Specialized awards to 1st, 2nd, and 3rd place age group finishers.

TEAMS

Teams can be comprised of 2 or 3 member teams.

Each team member must sign waiver registration form

FOR MORE INFORMATION

Contact Katie or Bruce at Shosie's Cyclery at 815-633-0755 or visit www.rockfordroadrunners.org

*Please sign waiver and mail entry form along with payment to the address indicated above. Each participant must sign the waiver.