

**CAN YOU TAKE A FEW MINUTES TO COMPLETE THE FOLLOWING?**

Age \_\_\_\_\_  
How many previous Triathlons have you done? \_\_\_\_\_ How many Runners Soul Triathlons? \_\_\_\_\_

Occupation/School attending \_\_\_\_\_

Are you planning to compete in any other Triathlons or endurance events this year?

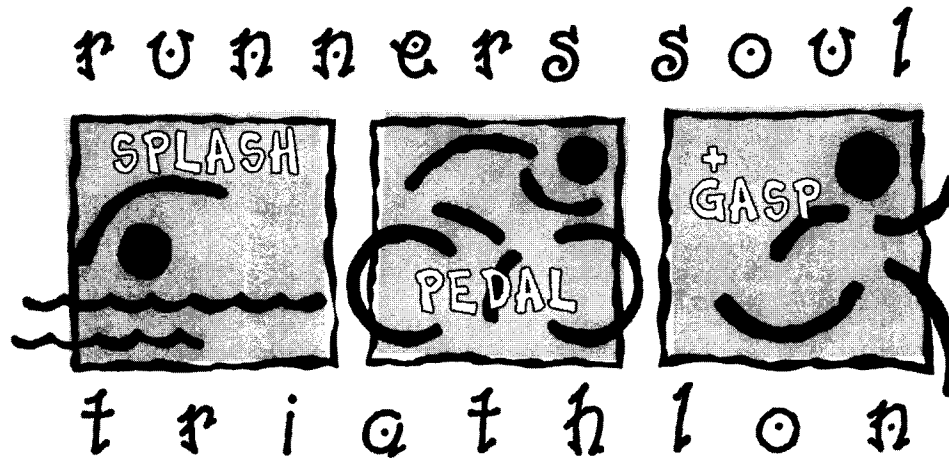
If so what \_\_\_\_\_

Other past accomplishments \_\_\_\_\_

Challenges you've overcome to train and compete \_\_\_\_\_

Future athletic goals \_\_\_\_\_

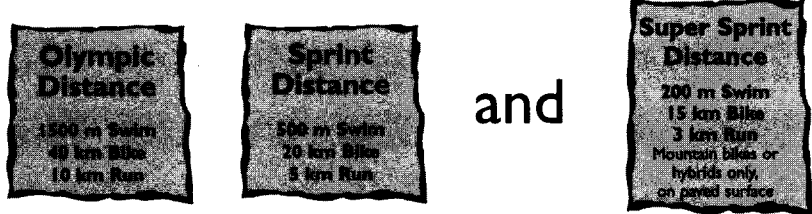
What is your goal in this triathlon? \_\_\_\_\_



2 0 0 7  
lethbridge, alberta

Entry Deadline: April 19, 2007  
(or when each event is full)

**Sunday May 13, 2007 • 9:00 AM • U of L  
Lethbridge, Alberta**



Limited to 96 participants per event!

Download entries from our website.  
[www.runnersoul.com](http://www.runnersoul.com)

**AGREEMENT AND ACKNOWLEDGEMENT OF RISK**

I hereby agree to comply with all the rules and regulations and event instructions of the Runners Soul Triathlon and its directors.  
I hereby consent to receive medical treatment deemed advisable in the event of injury, accident and illness during the Runners Soul Triathlon event.  
I hereby agree that my entry fee will be non-refundable.

In consideration of your acceptance of this race entry, I, for myself, my heirs, executors, administrators and assigns, forever waive, release and discharge any and all rights, demands, claims for damages and causes of suit or action known or unknown, that I may have against Runner's Soul and any and all participation race sponsors and supporters and directors, officers, employees and agents of such parties, for any and all injuries in any manner arising or resulting from my participating in said race. I attest and verify that I have full knowledge of the risks involved in this race, that I assume those risks, that I will assume and pay my own medical and emergency expenses in the event of accident, illness or other capacity, regardless of whether I have authorized such expenses and that I am physically fit and sufficiently trained to participate in this race.

\_\_\_\_\_  
Printed or typed signature  
\_\_\_\_\_  
Signature  
\_\_\_\_\_  
Signature of parent/guardian if entrant under 18 years:  
\_\_\_\_\_  
Date:

I, the parent/legal guardian of the named competitor hereby certify that I have read and agree to be still-bound by the items of the above waiver on behalf of said competitor.



**ENTER  
EARLY**



**THIS EVENT DOES FILL UP WELL BEFORE ENTRY DEADLINE SO ENTER EARLY!**

## COURSE DESCRIPTION

### **Olympic**

**Swim** 1500 m

Max Bell Aquatic Centre, University of Lethbridge (50 m swimming lane)

**Bike** 40 km

A fast, flat out and back.

**Run** 10 km

A challenging run from the university down into the river valley and across Whoop Up Bridge with a real "character" hill near the finish.

### **Sprint**

**Swim** 500 m

Max Bell Aquatic Centre, University of Lethbridge (50 m swimming lane)

**Bike** 20 km

A fast, flat out and back.

**Run** 5 km

A challenging run from the university down into the river valley and across Whoop Up Bridge with a real "character" hill near the finish.

### **Super Sprint**

**Swim** 200 m

Max Bell Aquatic Centre, University of Lethbridge (50 m swimming lane)

**Bike** 15 km

Mountain Bikes or Hybrids Only

**Run** 3 km

A challenging run from the university down into the river valley and back up the hill.

## ENTRY FORM

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ Province \_\_\_\_\_ Postal Code \_\_\_\_\_

Ph# \_\_\_\_\_ Business # \_\_\_\_\_

Email Address \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age as of May 13, 2007 \_\_\_\_\_

Event Olympic \_\_\_\_\_ Sprint \_\_\_\_\_ Super Sprint \_\_\_\_\_

Est. Swim time 1500m (Olympic) \_\_\_\_\_ min.

Est. Swim time 500m (Sprint) \_\_\_\_\_ min.

Est. Swim time 200m (Super Sprint) \_\_\_\_\_ min.

**CATEGORY** - Age as of May 13/07

**Male:** 14-15, 16-19, 20-29, 30-39, 40-49, 50-59, 60+

**Female:** 14-15, 16-19, 20-29, 30-39, 40-49, 50-59, 60+

Do you wish the medical personnel of the Runners Soul Triathlon to be aware of any specific medical problems?

\_\_\_\_\_  
\_\_\_\_\_

All participants will  
receive a really cool  
souvenir race item...  
not a t-shirt

## RACE PACKAGE PICKUP

Saturday May 12, 2007 • 9:30 am - 5:00 pm

Runners Soul 2646 S. Parkside Dr.

Lethbridge AB T1K 0C4 (403) 327-2241

Sunday May 13, 2007 • 7:00 am - 8:00 am (out of towners only please)

at the University of Lethbridge

## FOR INFO

(403) 327-2241 phone

or check out our website: [www.runnersoul.com](http://www.runnersoul.com)

(Entry can be downloaded from the website!)

To confirm entry check the website: [www.runnersoul.com](http://www.runnersoul.com)

## NO CANCELLATIONS OR REFUNDS

(even for darn good reasons!)

\$60.00/per person

**Note: Entry Deadline April 15/07**

Late Entry (After April 16, 2007 if space is available)

\$70.00/per person

**Make cheque or money order payable to Runners Soul. Out of town entries should be sent to:**

**Runners Soul 2646 S. Parkside Dr.**

**Lethbridge AB T1K 0C4 (403) 327-2241**

**(PLEASE FILL OUT BACK PAGE)**

Information will be used to assist finish line announcer.