



THE SUPERKIDS TRIATHLON

Registration Form

June 1, 2008 at the South County Y.M.C.A @ 9:00 am

Childs Name (please print): _____

Parent/Guardian Name: (please print): _____

Gender: _____ Birth Date and Age on Race Day: _____

Address: _____

Phone: _____ Email: _____

Mandatory Questions:

Does your child's bike have a kickstand? _____ YES _____ NO

Your child's t-shirt size? _____ Youth S _____ Youth M _____ Youth LG _____ Youth XL

Please rate your child's swimming abilities (5 being a swim team member; 1 being a novice) _____

USAT Member #: _____

** (All participants must be youth members of USAT – the cost is \$5.00.

Please sign-up at usatriathlon.org or call (719) 955-2807 or pick-up an application on Sat May 31st at Y.M.C.A)

Parent/Guardian Signature: _____

Cost: 25.00 Please make check payable to TRIMOM Productions, LLC and send it along with your completed Registration Form. **Mail to:** 64 Carpenter Drive South Kingstown, RI 02879

Registration Forms must be received in our office no later than Thursday, May 29, 2008
After that date, you must register in person at South County YMCA on Sat, May 31st (3 to 5:00 pm)!

Any questions please contact Race Director Kathy Robbins at info@risuperkids.com or (401) 741-0831.

More information and online registration is available on our website www.risuperkids.com

SEE YOU ON RACE DAY!

**** An event to fight childhood obesity. Proceeds to benefit local school and their athletic endeavors!**

Office Use Only:

USAT Application Received: _____ Yes _____ NO

USAT Fee Received: _____ Yes _____ NO

USAT Waiver Received: _____ Yes _____ NO

Check # _____ Cash _____