



2018 INDIVIDUAL REGISTRATION FORM

Table with columns: CHECK BOX, Event, Date, Location, Distance, Early Fee, Standard Fee, Late Fee, Site Fee. Lists various triathlon and running events with their respective fees.

Name: first last Gender: M or F Date of Birth: month | day | year

Age: Address: street city state zip Phone: xxx-xxx-xxxx

E-mail Address: write legibly please - important for race communication Team or Club Affiliation:

Shirt Size (please circle choice of neutral & specific:) Gender Neutral XS S M L XL XXL Gender Specific XS S M L XL XXL

Emergency Name & Phone:

FOR TRIATHLON EVENTS ONLY: USAT # (if not a member please pay extra 1-day insurance of \$15 adult / \$10 youth)

Category (circle one): Standard Age Group | Beginner (raced 3 or fewer triathlons) | Athena (165#) | Clydesdale (220#) | AquaBike (swim/bike) | CycloRun (bike/run)

Estimated Swim Time Estimated Finish Time (list on back for each race if signing up for multiple events)

Total Payment: NOTE: Please list any medical conditions and notes for race announcer on the back of this form

Payable and Mailing Address: Team Magic, Inc. | 2315 Eugenia Ave | Nashville, TN 37211