



# 2017 RELAY TEAM REGISTRATION FORM

Mail To: Team Magic, Inc. | 2315 Eugenia Ave | Nashville, TN 37211

CHECK	Event	Date	Location	Distance	Early	Standard	Late Fee	Site Fee
	Capital of Dreams Triathlon	4/29/17	Montgomery, AL	400m S   20k B   5k R	\$185 by 1/31	\$195 by 4/9	\$220 after	\$230
	Capital of Dreams Sprint Triathlon	4/29/17	Montgomery, AL	1.5k S   40k B   10k R	\$100 by 1/31	\$110 by 4/9	\$130 after	\$140
	Buster Britton Memorial Triathlon	6/10/17	Pelham, AL	400yd S   13mi B   3mi R	\$105 by 1/31	\$115 by 5/21	\$135 after	\$145
	Chattanooga Waterfront Triathlon	6/25/17	Chattanooga, TN	1.5k S   42k B   10k R	\$185 by 1/31	\$200 by 6/4	\$225 after	\$235
	Chattanooga Waterfront Sprint Tri	6/25/17	Chattanooga, TN	.25mi S   10.5mi B   3mi R	\$100 by 1/31	\$110 by 6/4	\$130 after	\$140
	Music City Triathlon	7/23/17	Nashville, TN	1.5k S   45k B   10k R	\$185 by 1/31	\$200 by 7/2	\$225 after	\$235
	Music City Sprint Triathlon	7/23/17	Nashville, TN	300m S   22.5k B   3k R	\$115 by 1/31	\$125 by 7/2	\$145 after	\$155
	Mountain Lakes Endurance Tri	8/5/17	Guntersville, AL	1mi S   32.4mi B   8mi R	\$185 by 1/31	\$200 by 7/16	\$225 after	\$235
	Mountain Lakes Sprint Triathlon	8/5/17	Guntersville, AL	600yd S   16.2mi B   3mi R	\$100 by 1/31	\$110 by 7/16	\$130 after	\$140
	Cedars of Lebanon Triathlon	8/26/17	Lebanon, TN	200yd S   10mi B   2mi R	\$100 by 1/31	\$110 by 8/6	\$130 after	\$140
	Alabama Coastal Triathlon	9/9/17	Gulf Shores, AL	1.5k S   24mi B   6mi R	\$185 by 1/31	\$200 by 8/20	\$225 after	\$235
	Coastal Tri-It-On Triathlon	9/9/17	Gulf Shores, AL	300yd S   10mi B   2mi R	\$100 by 1/31	\$105 by 8/20	\$125 after	\$135

**Category** (circle one type of team:) Male | Female | Mixed Gender | Family | Corporate

Team Name: \_\_\_\_\_

**Swimmer Name:** \_\_\_\_\_ first \_\_\_\_\_ last Gender: M or F Date of Birth: month | day | year

Address: \_\_\_\_\_ street \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_ Phone: \_\_\_\_\_ xx-xxx-xxxxx

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: \_\_\_\_\_

USA Triathlon # \_\_\_\_\_ (if not a member pay extra 1-day insurance of \$15 adult / \$10 youth for each Team Member not a member of USAT)

**Biker Name:** \_\_\_\_\_ first \_\_\_\_\_ last Gender: M or F Date of Birth: month | day | year

Address: \_\_\_\_\_ street \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_ Phone: \_\_\_\_\_ xx-xxx-xxxxx

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: \_\_\_\_\_

USA Triathlon # \_\_\_\_\_ (if not a member pay extra 1-day insurance of \$15 adult / \$10 youth for each Team Member not a member of USAT)

**Runner Name:** \_\_\_\_\_ first \_\_\_\_\_ last Gender: M or F Date of Birth: month | day | year

Address: \_\_\_\_\_ street \_\_\_\_\_ city \_\_\_\_\_ state \_\_\_\_\_ zip \_\_\_\_\_ Phone: \_\_\_\_\_ xx-xxx-xxxxx

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: \_\_\_\_\_

USA Triathlon # \_\_\_\_\_ (if not a member pay extra 1-day insurance of \$15 adult / \$10 youth for each Team Member not a member of USAT)

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