



Levite Jewish Community Center

Sunday, May 13, 2018

Start Time 8:00 am

CHECK BOX	Event	Fee*		
		Through 4/1	4/2-4/29	After 4/29
	AGE 7-10; 100m swim / 1k run	\$20	\$25	\$30
	AGE 11-15; 200m swim / 2k run	\$20	\$25	\$30

Name: first last

Gender: M or F Age: Date of Birth: month | day | year

Address: street city state zip

Phone: xxx-xxx-xxxxx Team or Club Affiliation:

E-mail Address: *write legibly please - important for race communication*

Shirt Size (please circle choice:) Youth S M L XL Adult Unisex S M L

Emergency Name & Phone:

USAT MEMBERSHIP NUMBER: or *buy USA Triathlon membership for \$10

Total Payment: (Remember to add \$10 for USA Triathlon membership if not already a member)

NOTE: Please list any medical conditions and notes for race announcer here:



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

