



BIG LAKE TRIATHLON REGISTRATION FORM

JULY 31, 2011

Individual _____ Team _____

Individual or Team Name: _____

Address: _____ Phone: _____

City: _____ St: _____ Zip: _____

E-mail: _____ USTA#: _____

Gender: M _____ F _____ Age on race day: _____ T-Shirt Size: _____

Team Information:

<u>Name</u>	<u>Age on Race Day</u>	<u>Gender</u>	<u>USTA#</u>	<u>T-SHIRT SZ</u>
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Swimmer: _____

Bike: _____

Runner: _____

Entry Fee: Individual \$60.00 Team \$120.00
(Please circle one)

Please make checks payable & mail to:

Entry Fee: _____

Lakeshore Entertaining &
Event Management

Non-USTA Fee: _____
(Additional \$10.00 per participant if not a current
USTA member.)

PO Box 521847
Big Lake, AK 99652
lakeshoreentertaining@alaska.net
907.230.0935 cell
907.892.8319 fax (MUST call cell first)

Total Due: _____

CREDIT CARD

Fill in your information here and mail it to the address above; OR fax it to us at the number above—
NOTE, TO FAX YOU MUST CALL FIRST, the fax is not an automatic fax:

Name on Card

Exp. Date

Billing Address for Card

City

ST

CVI Code on back of card

Card Zip Code

Number— please write clearly

Signature

**ONCE YOUR REGISTRATION IS RECEIVED, YOU WILL GET AN E-MAIL
CONFIRMATION FROM US WITH ADDITIONAL BIB PICK UP INFORMATION**