



MAY 24, 2014

AGE GROUP	7-8	9-10	11-12	13-14
Swim	25 m	50 m	100m	150m
Bike	1 mile	1 mile	2 mi.	2 mi.
Run	.5 mi.	.5 mi.	.75 mi.	1.0 mi.

FREE CLINICS WITH REGISTRATION	
SWIM	TUES. 5/20 & THURS. 5/22 5:45 – 6:30 PM Suit, towel and goggles required
TRANSITION	WED. 5/21 6:00-7:00 PM

RACE LOCATION:

- Race begins **9:00 AM RAIN OR SHINE** at
The Graham Aquatic Center
543 N. Newberry Street
York, PA 17401

COURSE DESCRIPTION:

- Swim portion in a 25 meter pool in the Graham Aquatic Center
- Run & bike portions through neighboring parks and on roads closed to traffic

ENTRY INFORMATION:

- Open to the first **300** entries
- Youth Racers: \$25 with **FREE** T-Shirt and **FREE** clinics
- Parent Fun Run: \$10 without T-Shirt
- Race day entries accepted 7:30 -8:30 AM
- Entry fee is non-refundable

SAFETY INFORMATION:

- Bike helmets are required. **MUST** be Snell or ANSI approved
- All participants **MUST** wear appropriate footwear for the bike and run portions

GENERAL INFORMATION:

- Registrants are encouraged to pick up their packets prior to race day at the Graham Aquatic Center Wed. 5/21 or Thurs. 5/22 from 5:00-8:00 PM
- A **mandatory** pre-race meeting for all participants and parents will be held in the natatorium of the Graham Aquatic Center at 8:45 AM race day.

CONTACT INFORMATION:

- Judy Stewart
717-846-9126
YorkYKidsTri@gmail.com
- Updates and results will be posted at www.swimyorky.org

ALL NEW RUN & BIKE COURSES

POST RACE CELEBRATION WITH RAFFLE PRIZES & OUTDOOR FUN

York Y Kids Tri Registration and Waiver – 1 per participant

Name _____ Age _____ Male ___ Female ___ Birth Date __/__/____ Today's Date __/__/____
 Last First
 Address _____ City, State & zip _____

Phone (____) _____ - _____ Email Address _____ How did you hear about the Tri? _____

I know that running, biking and swimming the York YMCA Kids Tri is a potentially hazardous activity. I should not enter and swim, bike and run unless I am medically able and properly trained. I agree to abide by any decision of a race official relative to my ability to safely complete the event. I assume all risks associated with swimming, running, and biking the event including, but not limited to: falls, contact with other participants, the effects of the weather, including high heat/humidity, cold or slippery conditions of the course. All such risks being known and appreciated by me. Having read the waiver and knowing these facts, in consideration of your accepting my application, I, for myself and anyone entitled to act on my behalf, waive and release the race director, race officials, volunteers, sponsors including but not limited to the York YMCA aquatic club, the York YMCA, the city of York, York county and all of the representatives and their successors of said sponsors, from all claims or liabilities of any kind arising out of my participation in the event.

Participant signature _____ Parent/ Guardian Signature – Required for all participants _____

Entry Fees
 Youth Racer with t-shirt and clinics \$25 _____ Shirt Size: Youth M _____ L _____
 Adult S _____ M _____ L _____
 Parent/guardian without t-shirt \$10 _____ Payment: Visa/MasterCard # _____ EXP _____
 Check # _____ Please make checks payable to York YMCA Aquatic Club
 Mail To: York YMCA Aquatic Club c/o Judy Stewart
 1061 Elliott Lane
 York, PA 17403

The School district neither encourages nor discourages a student's participation in the activity described herein.

<http://www.swimyorky.org>

717-846-9126

