

# Adventure Fest Lake Samish Triathlon



**Who** Anyone of any ability

**What** 500 m swim in Lake Samish  
14 km road ride around Lake Samish  
5 km trail Run on Lutherwood's amazing trail system

**Where** Lutherwood Camp and Retreat Center on Lake Samish

**When** Saturday, August 6 9am start

**Categories** M & W, Youth, 10 year age groups masters, grand masters

**Rewards** Medals & bragging rights!

**Green** Please carpool to this event!  
Recycle everything you can!  
Waste nothing...except calories.

**Registration** MAIL-IN, ACTIVE.COM or DAY OF  
Please Register early!!  
Day-of closes 1/2 hour prior to start

**Directions** From I-5, take Exit 244, South Lake Samish  
Head west and follow course map to Camp Lutherwood  
**PLEASE CARPOOL**

**Parking** Ample parking available but PLEASE arrive early. Check website for details. Overnight lodging/camping available



**Go to: AdventureFest.org**  
for additional information and event updates. Please stay tuned!

## Participant Info: Please fill everything out & write legibly.

NAME \_\_\_\_\_

RACE DAY AGE \_\_\_\_\_ DOB \_\_\_\_\_ SEX: M / F

STREET \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

EMAIL \_\_\_\_\_

PHONE \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_

EMERGENCY PHONE# \_\_\_\_\_

Relay Team - Each member must complete & sign separate registration forms...please attach all three together when registering. Please circle team captain.

Swim - Name \_\_\_\_\_ Age \_\_\_\_\_ M / F

Bike - Name \_\_\_\_\_ Age \_\_\_\_\_ M / F

Run - Name \_\_\_\_\_ Age \_\_\_\_\_ M / F

Team Name \_\_\_\_\_ Total Age \_\_\_\_\_

Schedule	
Registraion / Parking opens:	7:00
Pre-race meeting at	8:45
Mass Start	9:00
First finishers at approximately	10:00ish
Youth Race	11:00ish
Rewards	11:15ish

	Pre 8/4	Day of	FEES:
Entry includes: entry, a Belly Timber Bar, participant medal, prizes, post-event meal, raffle entry, and ridiculous amounts of fun!!			
Sprint Triathlon, Solo	\$50	\$60	
Sprint Triathlon, Relay	\$60	\$70	
Youth	\$5	\$5	
Event Hoodie, size: _____	\$50	\$50	
Event Shirt, size: _____	\$10	\$10	
Additional post-event meal	\$10	\$10	
Donation to Lutherwood	__ x	\$10	
Parent Discount - got kids? yes!	minus	\$10	
GREEN FEE (Goes to support Whatcom County Parks Foundation)		\$1	
<b>TOTAL:</b>			_____

Credit Card Information:  
Name on Card: \_\_\_\_\_  
C C # : \_\_\_\_\_  
Card Type: \_\_\_\_\_ 3 digit security #: \_\_\_\_\_ Expiration: \_\_\_\_\_  
Signature: \_\_\_\_\_

Make checks payable and mail to: Lutherwood Camp and Retreat Center, 1185 Roy Rd, Bellingham, WA 98229 360-734-7652

## 2011 Adventure Fest - Lake Samish Triathlon ACCIDENT WAIVER AND RELEASE OF LIABILITY

I acknowledge that this is a strenuous test of my athletic ability. Adventure Fest is a rigorous test of a person's physical and mental limits and carries with it the potential for death, serious injury and property loss. The risks include, but are not limited to, those caused by terrain, darkness, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, lack of hydration, and actions of other people including but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors and/or producers of the event. These risks are not only inherent to athletics, but are also present for volunteers. I hereby agree to assume all of the risks of participating and/or volunteering in Adventure Fest. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released from dangerous or defective property owned, maintained, or controlled by them or because of their liability without fault. I certify that I am physically fit, have trained sufficiently for participating in this event and have not been advised otherwise by a qualified medical person. I acknowledge that this Accident Waiver and Release of Liability form will be used by the event holders, sponsors and organizers, and that it will govern my actions and responsibilities at said event. In consideration of my application and permitting me to participate in Adventure Fest. I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) Waive, Release and Discharge from any and all liability for my death, disability, personal injury, property damage, property theft or actions of any kind which may hereafter accrue to me including attorney's fees, expert fees, litigation costs, and my traveling to and from Adventure Fest. THE FOLLOWING ENTITIES OR PERSONS: NorKa, LLC., Whatcom County, Lutherwood Camp and Retreat and any involved municipalities, their directors, officers, employees, volunteers, representatives and agents, the event holders, event directors, event sponsors, vendors, event volunteers, property owners; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in Adventure Fest, whether caused by the negligence of releases or otherwise. I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during this event. I understand that at this event or related activities, I may be photographed and/or videotaped. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, organizers and/or assigns. This Accident Waiver and Release of Liability shall be construed broadly to provide a release and waiver to the maximum permissible under applicable law. In the event any aspect of this release is deemed to be unenforceable, I hereby agree that the release shall be construed as broadly as possible without impacting the remaining aspects of this release. I further agree to abide by all the rules and regulations as set forth by the directors of this event. I hereby certify that I have read this document and understand its content.

**PARTICIPANT'S SIGNATURE:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_

### NOTE: If 17 or under, Signature of Parent or Guardian is required below:

The undersigned parent and natural guardian or legal guardian does hereby represent that he/she is, in fact acting in such capacity and agrees to save, hold harmless and indemnify each and all of the parties referred to above from all liability, loss, claim or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.  
**PARENT'S SIGNATURE:** \_\_\_\_\_  
**DATE:** \_\_\_\_\_