



DEFY 123 Triathlon

Bellevue Resort, Bohol, Philippines
October 13, 2013 (Sunday), 10 am Gun Start

REGISTRATION FORM

1 Km Swim, 110 Km Bike & 12 Km Run

Last Name		First Name		Middle Name	Nickname
Address: Street		Town	City	Country	ZIP Code
Landline Number		Mobile Number		Email Address	
Date of Birth (mm/dd/yyyy)	Age	Gender	Triathlon Team		
Emergency Contact Name		Contact Number	Email	Relationship	

CATEGORY

- ☐ **Individual** (Limited to 300 participants only)
- ☐ **Relay** (Each member must submit a filled-up form)

Team Name: _____

Swimmer: _____

Biker: _____

Runner: _____

REGISTRATION FEE

Individual: PhP 4,000 until Aug. 13, 2013, PhP 5,000 Aug. 14 – Oct. 1, 2013

Relay (2 or 3 pax): PhP 6,000

REGISTRATION OPTIONS

- Fill up this form and submit it to the following registration centers together with your registration fee payment.
 - Sabak Sports (Lapanday Center, Pasong Tamo Ext. Makati / Westgate, Alabang / Paseo De Sta. Rosa)
 - The Starting Line (Westgate, Alabang)
 - Bike King (Bonifacio High Street, Global City)
- For bank payments please print and fill up this form and deposit the registration fee to the accounts below. Take a picture of the application form together with the bank deposit receipt and email the picture to defytri@gmail.com. Please ensure that all parts of the form and deposit receipt are readable in the picture.
 - BPI (Sabak Sports Inc., Savings Account 1883108619)
 - BDO (Sabak Sports Inc., Savings Account 4880043764)

ACCIDENT WAIVER AND RELEASE OF LIABILITY

I acknowledge that this athletic event is an extreme 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, facilities, temperature, weather, condition of athletes, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, event monitors, producers of the event, &/or lack of hydration. These risks are not only inherent to athletics, but are also present for volunteers. I hereby assume all the risks of participating &/or volunteering in this event.

I certify that I am physically fit, have sufficiently trained for participation in the event, and have not been advised otherwise by a qualified medical person.

I acknowledge that this Accident Waiver and Release of Liability (AWRL) form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and the responsibilities at said event

In consideration of my application and permitting me to participate in this event, 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 or my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: Santana Triathlon Events Management Corporation, their directors, officers, employees, volunteers, representatives, and agents, the event holders, event sponsors, event directors, event volunteers; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made by other individuals or entities as a result of my actions during the Defy Triathlon.

I hereby consent to receive medical treatment which may be deemed advisable in the event of injury, accident and/or illness during the event.

I understand that at this event or related events I may be photographed. I agree to allow my photo, video or film likeness to be used for any legitimate purpose by the event holders, producers, sponsors, organizers, and/or assigns.

This AWRL shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

I hereby certify that I have read this document and I understand its content.

Name: _____ Age: _____ Signature: _____ Date: _____

PARENT GUARDIAN WAIVER FOR MINORS (under 18 years old)

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 and hold harmless and indemnify each and all parties referred to above from all liability, loss, cost, 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.

Name: _____ Age: _____ Signature: _____ Date: _____



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RACE REGISTRATION RECEIPT

Registrant: _____

Date: _____ Amount: _____

Payment Received by: _____