

# **Fort Rucker Triathlon**

Saturday June 18<sup>TH</sup> 2022





Fort Rucker Triathlon will be open to the public/authorized patrons. Patrons (over the age of 16) who would like to attend the event will need a visitors pass BEFORE June 18 for access to the event.

Where: West Beach, Lake Tholocco on Johnston Rd., Ft Rucker, Alabama When: Saturday June 18<sup>th</sup> 2022; *Race Start*: 0700 CDT

# Race Course:

Swim-1/4 mile in Lake Tholocco Bike-10.6 miles, out and back, along an asphalt road Run-3.1 miles, out and back

# Details:

**Swim** 1/4 mile in the beautiful waters of Lake Tholocco. The water is usually calm and very flat in the morning. The course is well marked with buoys. Lifeguards will be on duty.

**Bike:** The 10.6 mile, out-and-back, fast and rolling **bike** course begins at West Beach transition of Lake Tholocco, proceeds South along Johnston Road, and right onto Christian Road. Turnaround is just prior to the Faulkner Gate. **Run:** The 3.1 mile, out-and-back, fast and rolling **run** will begin at the West Beach Transition, proceed north along Johnston, turn around just prior to the RV park and return to the finish.

Civilian/Military Individuals and Relay Teams (2 or 3 competitors per team) are welcome. 6 starting heats:, Female 15-29, Male 15-29, Female 30 and above, Male 30-39, Male 40 and over, Male and Female 14 and under Swim caps will be provided and must be worn during the swim. Helmets must be worn during the bike (not provided).

Aid stations will be provided on the bike and the run course. Post-race refreshments will be provided.

# **Entry Fee:**

# All competitors have until the day of June 12th to register without an increase in the fee.

Individual Early Registration: \$50 (by June 12<sup>th</sup>); June 13<sup>th</sup>-Race day, entry fee is \$60.

Relay Team (max 3 competitors) Early Registration: \$95 (by June 12th); Relay Team (max 3 competitors) June 13<sup>th</sup>- Race Day: \$105

# \*\*All pre-registered competitors will receive a T-shirt and participation medal\*\*

# PRE-REGISTRATION IS HIGHLY RECOMMENDED!!!

# **Pre-Registration/Packet Pickup:**

Registration forms available and payment may be made at the Fortenberry-Colton Physical Fitness Center, and Fort Rucker Physical Fitness. You may also mail your payment to the address listed at the bottom of the page. **Pre-registration packet pick up will be Friday, June 17**<sup>th</sup>, **1500-1700 on site at West Beach, Lake Tholocco.** Race day registration: 0530 to 0630 CDT; Transition closes 0645 CDT; Race starts 0700 CDT.

# Awards:

Trophies will be awarded to the Overall Female and Male, Master Male and Female, Grandmaster Female and Male. First Place trophies and Second and Third Place medallions will be awarded for the following age categories: 14 & Under, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-59, 60 & Over Awards will be given to the 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> place Relay teams.

CASH AWARDS WILL BE GIVEN TO TOP OVERALL FINISHERS AND THE TOP RELAY TEAM !!!

Race Director: Call Nicole Crowley at 255-1951 for questions and more info. Email: nicole.r.crowley4.naf@army.mil

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# **Fort Rucker Triathlon**

**BIB NUMBER** 

(Staff only)

Saturday June 18<sup>th</sup> 2022



Circle Shirt	Size:	S	М	L	XL		
Circle Race:	Individ	lual	Relay 1	Гeam (2	or 3 competitors per team) Plea	ase list <u>name</u> on each event	
Relay Team Name:							
SWIM	l:			BI	IKE:	Run:	

#### RELEASE AND HOLD HARMLESS AGREEMENT DEPARTMENT OF FAMILY AND MORALE, WELFARE, AND RECREATION

I know that participating in a Triathlon is a potentially hazardous activity. I should not enter or participate 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 Triathlon. I assume all risks associated with participation in this event including, but not limited to, falls, contact with other participants, the effects of the weather, including high heat and-or humidity, traffic, and the conditions of the road, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act on my behalf, waive and release the Department of Family and Morale, Welfare, and Recreation Fund and the United States Government from any liabilities or claims arising from my own participation. I agree that I will never prosecute or in any way aid in the prosecuting of any demand, claim or suit against the United States Government for and loss, damage or injury to my person or property that may occur from any cause whatsoever as a result of taking part in this activity. I also understand and agree that I may be held liable for any damage or loss to the United States Government that is caused by my gross negligence, willful misconduct or fraud. I grant Fort Rucker Family & MWR, its representatives and employees permission to take photographs of me and my property. I authorize Fort Rucker Family & MWR, the irrevocable and unrestricted right of copyright, use and publishing of said images in print, electronically, or in any other medium. I agree that Fort Rucker Family & MWR may use such photographs of me with or without my name and for any lawful purpose, including but not limited to publicity, illustration, advertising and web content. I hereby release photographer and Family & MWR from all claims and liability relating to said photographs. I have read and understand the above:

Signature:						
	Parent or Guardian must s	sign if under 18				
Last Name:	First Name:					
Gender: M or F Bi	rthdate:	Age (as c	of June 18 <sup>th</sup> 2022) _			
Email:		Phone:				
Signature:						
	Parent or Guardian must sign	if under 18				
,	n and check (made out to <u>IMWRF</u> )	to the address:				
Fort Rucker Triathlon 2022						
Physical Fitness Center						
Bldg. 4605 Andrews Ave.						
P.O. Drawer 620189						
Fort Rucker, AL 36362						
Please do	not write below this line	. To be complete	d by MWR Staff			
Information	has been verified by staff					
Form is com	-	Staff name		Date received		