



June 5th, 2011: Oliver Half Iron Triathlon VOLUNTEER REGISTRATION 2011

NAME: _____ **Home Phone** _____
Mailing Address: _____ **Work Phone** _____
City: _____ **Postal Code** _____ **Mobile Phone** _____
E-mail _____ **Age (check one)** _____ **under 18 yrs** _____ **over 18 yrs**
T-shirt size (circle one) **S M L XL XXL** **Special Skills or training** _____

Please check what areas you are interested in: (check)

Race Package Assemblers	_____	Thursday		
Package Pick-Up	_____	Friday	_____	Saturday
Press Volunteers	_____	Race Week	_____	Saturday _____ Sunday
Set Up	_____	Friday	_____	Saturday _____ Sunday
Take Down			_____	Sunday
Registration	_____	Friday	_____	Saturday
(Body Marking/Chips)			_____	Sunday
Start/Finish			_____	Sunday
Swim: Shore Support			_____	Sunday
Lifeguards			_____	Sunday
Canoeists			_____	Sunday
Kayakers			_____	Sunday
Motorcyclists			_____	Sunday
Transition	_____	Saturday	_____	Sunday
Cycle Course			_____	Sunday Location Preference:
Run Course			_____	Sunday Location Preference:
Food			_____	Sunday
Award Presentation Ceremony			_____	Sunday
Security	_____	Friday	_____	Saturday _____ Sunday
Volunteer/Information Booth	_____	Friday	_____	Saturday _____ Sunday

Emergency Information

Person to notify in case of emergency _____ Phone: _____

Allergies or medical diagnosis we should know about _____

Release

In signing this release, I acknowledge that I understand the intent there of and I hereby agree and absolve and hold harmless the Oliver Half Iron, Outback Events, The Town of Oliver, Ministry of Transportation & Highways, corporate sponsors, cooperating organizations, and any other parties connected with the Oliver Half Iron Triathlon in any way, singularly or collectively, from and against any blame and liability for injury, misadventure, harm, loss, inconvenience or damage hereby suffered or sustained as a result of participating in the Oliver Half Iron Triathlon or any activities associated herewith. I hereby consent to and permit emergency treatment in the event of injury or illness. Also, I give full permission for the use of my name and photograph, still or video, in connection with this event.

Signature _____ Date _____

Signature of guardian if applicant under 19 yrs _____

Please fill out form & mail to Outback Events at 4310 Hazell Rd Kelowna V1W 1P8 **OR** drop off this form to Oliver Parks & Recreation **OR** go email me at sarah@outbackevents.ca.

For more information please call Joe or Sarah at 764-3204. Thank you so much for your participation in this great event!