

Lake Travis Relay

SOLO APPLICATION

Saturday, October 8, 2011



Please Type or Print Clearly

Today's Date: _____ / _____ / _____

First Name _____ Middle Initial _____ Last Name _____

Mailing Address _____ Evening Phone (____) _____

City _____ State _____ Daytime Phone (____) _____

Zip Code _____ Email address: _____

Birthdate Month mm Day dd Year yyyy Age as of October 8, 2011 _____

Gender: M / F ASA member: yes / no* Please circle: T-shirt / Tank Size: S M L XL XXL

Swimmer Reminder: please attach your long-distance swimming verification information.

Name of Kayaker _____ Ph: _____ Email: _____

Extra shirts — S M L XL @ \$12 ea size: XXL @ \$14 ea TOTAL for T's: = \$ _____

TERMS OF PARTICIPATION

I, the undersigned applicant, am over 18 years of age and have all requisite legal capacity to agree to the conditions of this event. In consideration of the American Swimming Association, LLC (ASA) accepting my entry, I agree to the following Terms of Participation.

HOLD HARMLESS AND RELEASE: I hereby agree to FULLY RELEASE, DEFEND and HOLD HARMLESS ASA, Travis County Parks, The Pier on Lake Travis, and all of their employees, volunteers, sponsors, referees, officials, directors, managers, officers, coaches, agents, and members for, from and against all claims, demands and rights of action, including without limitation, claims arising from bodily injury or death, brought by or through me, my family members or heirs, which in any way arise out of or are connected with my participation in this event, my participation in or travel to and from this event, or the conduct of ASA, Travis County Parks, The Pier on Lake Travis or any of their employees, volunteers, sponsors, directors, managers, officers, coaches, agents, and members, REGARDLESS OF WHETHER SUCH ALLEGED BODILY INJURY, DEATH OR OTHER DAMAGE IS CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF ASA, Travis County Parks, The Pier on Lake Travis, THEIR employees, volunteers, referees, sponsors, officials, DIRECTORS, MANAGERS, OFFICERS, COACHES, AGENTS, AND MEMBERS, OR ANY ONE OR MORE OF THEM. I acknowledge that open water swimming involves inherent risks, including without limitation risk of bodily injury or death, and that I participate in this activity at my own risk. I agree to fully accept such risks, and attribute no responsibility to ASA, Travis County Parks, The Pier on Lake Travis, or any of their employees, sponsors, referees, officials directors, managers, officers, agents, coaches, or members for the creation or existence of such risks.

ALL FEES NON-REFUNDABLE. SWIM AT YOUR OWN RISK.

AFFIDAVIT: I, the undersigned applicant, intending to be legally bound, hereby attest that all information provided is true and accurate.

Signature _____

Date _____

- Name clearly printed
- Address, Phone and email of swimmer
- T-shirt size selected & check for any extra t-shirts ordered
- Swimmer signature
- ASA registration number or ASA Membership Form enclosed
- Entry fee correct & made payable to: American Swimming Assoc. LLC
- Entry properly addressed
- Verification of long-distance swimming experience

Send completed entry form and make checks payable to:

American Swimming Association, LLC

and mail to:

Dr. Keith Bell, Race Director
 Attn: Lake Travis Relay Race
 3101 Mistyglen Circle
 Austin, TX 78746
 512-327-2260

F E E S	if rec'd by Tuesday, 9/27/11:	Entry Fee \$110	_____
	if rec'd by Sunday, 10/2/11:	Entry Fee \$125	_____
	10/3/11 or later (if available):	Entry Fee \$150	_____
2011 ASA Membership:		\$23	_____
Extra T-shirt(s) <u> </u> S <u> </u> M <u> </u> L <u> </u> XL @ \$12 ea:			_____
		<u> </u> XXL @ \$14 ea:	_____
TOTAL FEES ENCLOSED:			_____