

# Tolland Recreation Summer Solstice Sprint Triathlon

Saturday, June 21<sup>st</sup>

Starts and ends at Crandall Park in Tolland, Ct.

Proceeds from this event will benefit the Recreation Scholarship fund and the Youth Hall Building Fund.

**Registration:** Participants must mail their completed entry form with fee to the Tolland Recreation Department  
21 Tolland Green  
Tolland, Ct. 06084

Checks should be made payable to the "Tolland Recreation Department"

**On-line registration** will be available at:

<http://activenet1.active.com/tollandrecreation/>

starting Feb.4th

**8am Start for Adults** -300 yd swim, 12 mile bike, 3.1 mile run.

(all distances are approximate) (t-shirts, swim caps and gift bags provided)

**Cost: \$55 per person by June 9<sup>th</sup> - \$65 after June 9<sup>th</sup>**

**12pm Start for Kids** -ages 9 to 14 - **50 yd swim, 1 mile bike, ½ mile run**

(all distances are approximate) (t-shirts, swim caps and gift bags provided)

**Cost: \$28 per person by June 9<sup>th</sup> - \$38 after June 9<sup>th</sup>**

The event is open to the first 80 registrants.

**Day of Registration/Package Pickup** - Crandall Park Pavilion - 6am till 7:30am

## **Divisions:**

Racers will be divided up into categories based on their age as of Dec. 31, 2008.

Adult divisions will include: 15-19, 20-29, 30-39, 40-49, 50-59, 60-69, 70 & up

Youth divisions will include: 9-11, & 12-14.

**Parking:** is available at Crandall Park and at the Baptist Church across the road from the Park.

**Awards:** will be presented to the top three males and females in each age category.

**Volunteers:** are needed to help with check in, on & off course direction, manning aid stations, and various other jobs. Call us if you can help. 860-871-3610.

**Contact Information :** Tom Ainsworth

Tolland Recreation Department - phone - 860-871-3610

email - [tainsworth@tolland.org](mailto:tainsworth@tolland.org) fax - 860-871-3689

### **Race Course:**

For the Adult race -

**Swim** - will take place in Powell Pond, adjacent to the Lodge and will consist of two laps around the pond area marked by buoys.

**Bike** - will start in the Crandall 2 parking lot and go out the entrance road and right on to Cider Mill Road. Then Cider Mill to Grant Hill Road then right on Gehring Road, left on Swamp Road, left on Lawlor Road, left on Pine Hill Road, left on White Birch Drive, right on Laurel Ridge, left on Pine Hill, right on New Road, right on Grant Hill, left on Broadway, left onto North River Road which turns into Weigold Road, left on Gehring Road Extension, right onto Grant Hill Road back to the starting point. (**This is not a closed course** so participants need to be careful and obey all traffic regulations).

**Run** - on the Lodge Road thru the parking lot road to Crandall Park, out the park entrance, left on the sidewalk adjacent to Cider Mill Road, left to Lions field, into the Lions field parking lot following the paved path around to the right, behind Lions Field, back to Cider Mill Road, right into the coned off area of the road, down the hill back past the Crandall Park entrance, past the lower parking lot, then right into the Parks & Facilities entrance road back up to the Bike transition area, then repeat the course and back to the finish line which will be marked.

### **Race Course:**

For the Youth race - Is subject to change

**Swim** - will take place across Crandall Pond over to Lions Field.

**Bike** - will start in the Lions Field parking lot, following the paved pathway behind the field to the right up to the sidewalk on Cider Mill Road then take a right down the coned area, past the Park entrance, past the lower parking lot then right into the Parks & Facility entrance, up past Powell Pond, through the Lodge parking lot, down the dirt road, back to the sand volleyball court area.

**Run** - will go past the softball field, following the paved path to the bridge, then left onto the stone path along Powell Pond, looping back to the softball field, to the right along the outfield fence back to the finish line. ??

## Event Rules -

1. All athletes must participate and compete in the age group division corresponding to their age on December 31<sup>st</sup>, 2008.
2. Participants must cover the prescribed course in its entirety. It is the participants responsibility to know the course.
3. Participants shall plainly display their race numbers at all times, and shall maintain the race number in an unaltered, unobstructed and readable state at the start and finish gates, in the transition areas, and on the course.
4. No participant shall, at any time during the event, use or wear a headset, headphones, radio, MP3 player, Ipod, or any other personal audio device.
5. No participant shall use any equipment which might provide an unfair advantage or endanger other participants.
6. No participant shall commit any dangerous act which could cause injury to any participant.
7. All participants must follow the direction of race officials.
8. Your helmet must be fastened securely before you remove your bike from the rack and keep it done up until after you replace your bike on the rack. You will be stopped if you do not obey this rule.
9. No riding is allowed in the transition zone. You must mount and dismount your bike in the marked zones.
10. You must keep to the right at all times, unless you are passing someone in front of you. This is not a closed course, you are sharing the road with other competitors and motorists, so you must obey the rules of the road.
11. Don't get too close to the person in front of you on the bike. This is called drafting and is not allowed. You must ride single file to the right and stay four bike lengths behind the competitor in front of you.
12. If you want to overtake someone you have 15 seconds to do so and you must be gaining on the person in front at all times during that period. The correct way to pass is to stay on the right, ride up behind the person in front, and when you are close enough, check behind you and if the way is clear, go around them. After you have passed them, immediately move back to the right side of the road. You must overtake to the left and not on the inside or right of another competitor.
13. If you get passed, you must immediately drop back four bike lengths so you are out of the draft zone. You may not speed up once someone's wheel has gone past your's to catch up to them again. You must drop out of the draft zone first before you attempt to overtake them.
14. You may not receive outside assistance of any kind from anyone. The exception is on the swim leg. If you encounter difficulty, raise your hand to grab the attention of a safety boat or race official.
15. All other official USA Triathlon rules will apply.

Please complete the entire form, sign the waiver and include payment.

Mail to : Tolland Recreation Dept.

21 Tolland Green  
Tolland, Ct. 06084

Drop off at above address M-T-W - 8:30am-4:00pm

Thurs - 8:30am-7:30pm

Fri - 8:30am-12:00pm

For More Information Contact: Tom Ainsworth [tainsworth@tolland.org](mailto:tainsworth@tolland.org)

or

Steve Soucy - [teamsoucy@sbcglobal.net](mailto:teamsoucy@sbcglobal.net)

This is a non-sanctioned event.

## 2008 Tolland Recreation Summer Solstice Sprint Triathlon Registration Form (Please Print Legibly)

Full Name: \_\_\_\_\_ Age on 12/31/08 \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Date of Birth: \_\_\_\_\_

USAT Member # \_\_\_\_\_

Emergency contact name: \_\_\_\_\_ Phone #: \_\_\_\_\_

T-shirt size - (Circle One): S M L XL

Payment method - check or credit card - MC/Visa Only

\_\_\_\_\_  
credit card number and expiration date:

## Waiver Agreement and Release of Liability Form

Read this document carefully before signing.

(This waiver agreement will affect your legal rights and will limit or eliminate your ability to bring a future lawsuit.)

I understand and acknowledge that I am legally agreeing to the statements in the following paragraphs of this waiver agreement by affixing my signature below and that these statements are being accepted by the Town of Tolland in consideration for allowing me to participate in the Tolland Summer Solstice Sprint Triathlon; and I further understand and acknowledge that my statements are being relied upon by race sponsors, organizers, administrators, volunteers and other parties defined below as the "Released Parties".

1. I acknowledge that a sprint triathlon (hereinafter "Event") is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury or property damage. I acknowledge and agree that it is my responsibility to determine whether I am sufficiently fit and healthy enough to safely participate in this Event, and I attest and certify that I am or will be sufficiently fit and physically trained to participate in this Event which I elect to enter. I have no physical or medical condition which would endanger myself or others if I participate in this Event, or would interfere with my ability to safely participate in this Event. I accept responsibility for the condition and adequacy of my competition equipment and my conduct in connection with this Event.
2. On behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, and anyone else who might sue on my behalf, I HEREBY WAIVE, RELEASE, and FOREVER DISCHARGE, all Event sponsors, Event producers, Event staff, administrators, officials, contractors, vendors and organizers (including race directors), volunteers, all other persons or entities involved with this Event, states, cities, towns and other governmental bodies and locations in which this Event or portions of this Event takes place, and the officers, directors, employees, agents, insurers, other participants and representatives of all of the above (collectively, the "Released Parties"), from any and all claims, causes of action, damages, losses (economic and non-economic), and liabilities of every kind (collectively "Claims"), for death, personal injury, or property damage, which may arise out of, result from, or relate to my participation in, or my traveling to or from, this Event including but not limited to any Claims for theft, damage to any equipment, negligence, partial or permanent disability, Claims relating to the provision of first aid, medical care, medical treatment, or medical decisions (at this Event site or elsewhere), and any Claims for medical or hospital expenses.
3. I acknowledge and ASSUME ALL OF THE RISKS and aspects of this Event. I acknowledge that running, bicycling, swimming and other portions of this Event are inherently dangerous and I understand that I will be participating in this Event at my own risk, that I am responsible for the risk of participating in this Event, and that I am waiving and releasing my legal rights to sue for any injury or damages arising out of or resulting from my participation in this Event. I further understand that any injury or damages incurred may be the result of negligence, omission or carelessness by the Released Parties.

4. I FURTHER COVENANT and AGREE NOT TO SUE any of the Released Parties for any of the Claims that I have waived, released, or discharged herein. I AGREE TO INDEMNIFY and HOLD HARMLESS the Released Parties from any and all expenses incurred, Claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, my breach or failure to abide by any part of this WAIVER AGREEMENT, my breach or failure to abide by any of USAT's Competitive Rules, and my actions or inactions which cause injury or damage to any other person.

5. I AGREE to abide by the Competitive Rules adopted by USAT and the Town of Tolland for this Event. I AGREE that prior to participating in this Event I will inspect the race course, facilities, equipment, and areas to be used, and if I believe or become aware that any are unsafe, I will immediately advise the Race Director. I FURTHER GRANT to Event organizers, and their licensees the right, permission, and authority to use my name, voice, picture, or photograph, in any broadcast, telecast, commercial advertisement, promotion, or other account of this Event, and I WAIVE any rights to future compensation to which I might otherwise have been entitled for such use.

6. The parent or legal guardian who signs the Waiver Agreement on behalf of a minor, (hereinafter "Said Person"), hereby acknowledges that he or she has the legal capacity and authority to act on behalf of Said Person to legally bind Said Person to the Waiver Agreement. The parent or legal guardian who signs the Waiver Agreement agrees to indemnify and hold harmless the Released Parties for any expenses incurred, Claims made, or liabilities assessed against them, as a result of any insufficiency of legal capacity or authority to act on behalf of Said Person in the execution of the Waiver Agreement.

7. As the parent or legal guardian of a minor participating in this Event, I hereby authorize any licensed physician, emergency medical technician, hospital or other medical or health care facility (hereinafter "Medical Provider"), to perform all procedures deemed medically advisable by the Medical Provider to treat or relieve any injuries and any related conditions of said minor received by participating in or relating to this event. I consent to the administration of anesthesia as deemed advisable during the course of such treatment. I realize and appreciate that there is a possibility of complications and unforeseen consequences in any medical treatment, and I assume any such risk for and on behalf of said minor and myself. I acknowledge that no warranty is being made as to the results of any medical treatment.

8. If any provision of the Waiver Agreement shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Waiver Agreement and shall not affect the validity and enforceability of any remaining provisions.

I HEREBY AFFIRM THAT I HAVE READ THIS DOCUMENT, AND I UNDERSTAND IT'S CONTENT.

(Athlete or Participant)

Print Name: \_\_\_\_\_ Signature: X \_\_\_\_\_ Date: \_\_\_\_\_  
Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

\_\_\_\_\_  
(Parent or Legal Guardian for Persons under Eighteen (18) Years of Age)

Name of Guardian: \_\_\_\_\_ Signature: X \_\_\_\_\_ Date: \_\_\_\_\_  
Relationship to Minor: \_\_\_\_\_

**\*\*\* RACE DAY REGISTRATION IS CASH ONLY \*\*\***

**A MESSAGE FROM THE USA TRIATHLON HEAD REFEREE TO ALL COMPETITORS:** Most triathletes come to races with only a rudimentary understanding of the rules of the sport. Indeed, few have ever read through the Competitive Rules in its entirety. In order to minimize misunderstandings on race day, I hope you will take the time to read the following summary of Position Violations, which you probably know as the drafting rules. I have reduced the Position Rules to the following concepts, which everyone can remember:

- **Ride on the right side of your lane.**
- **Keep three bike lengths between you and the cyclist in front of you.**
  - **Pass on the left of the cyclist in front, never on the right.**
- **Complete your pass within 15 seconds.** If passed, you must drop completely out of the zone, to the rear, before attempting to re-pass.

Remember you are racing in a USA Triathlon sanctioned event and there are USAT certified referees on the course to ensure fairness in the competition. There will be NO WARNINGS if you commit a foul during competition.

Triathlon is an individual event and you must take personal responsibility to understand the rules and avoid penalties. At the end of the race all citations by the officials are reviewed by the Head Referee who then decides if a penalty should be assessed. The Head Referee's ruling is final in the case of Position Violations and there are no protests or appeals of Position penalties. Officials commonly cite the following violations:

- **Illegal Position or Blocking**
  - **riding on the left side of the lane without passing.**
  - **Illegal Pass passing on the right.**
- **Overtaken - failing to drop back three bike lengths after being passed and before re-passing.**
- **Drafting -following a leading cyclist closer than three bike lengths and failing to pass within 15 seconds.**

**Though Position Violations carry a time penalty for each occurrence, if you are cited for three violations, you will be disqualified. Be sure that you have a CPSC approved helmet. Many foreign made helmets do not meet the safety standards of CPSC and are not allowed in USAT sanctioned events. Always have your chinstrap securely fastened! The helmet and chinstrap rule apply before, during, and after the event. The chinstrap rule is the easiest to follow, but some folks always seem to forget that's a DQ!** Remember to treat other athletes, volunteers, and officials with courtesy and consideration. Failure to do so is called Unsportsmanlike Conduct and you will be disqualified. All that being said, I hope you have a great race, lots of fun, and achieve all your goals.

**Refund Policy:**

**Unconditionally, no refunds to entrants before or after event(s) or for 'acts of god' or other events which in management's discretion, requires the cancellation or modification of the event(s). Such modifications may**

**include, but are not limited to: Holding a duathlon, running race or rescheduling of race date. The Race Director reserves the right to modify any distance, cancel any portion(s) of events or events in their entirety. Your entry fee will be considered a donation to the beneficiary. You may receive a receipt for your donation upon request.**

I assume the risk of running, biking, swimming or participating in any other event sanctioned by the USAT/USATF. I also assume any and all other risks associated with participating in USAT/USATF sanctioned events including but not limited to falls, contact and/or effects with other participants, effects of weather including heat, and /or humidity, defective equipment, the condition of the roads water hazards, contact with other simmers or boats and any hazard that may be posed by spectators or volunteers. All such risks being known and appreciated by me, and I further acknowledge that these risks include risks that may be the result of the negligence of the persons or entities mentioned above in paragraph (C), or of other persons or entities; (E) I agree not to sue any of the persons or entities mentioned above for any of the claims or liabilities that have been waived, released or discharged herein; and (F) I indemnify and hold harmless the persons or entities mentioned above in paragraph (C) from any and all claims made or liabilities assessed against them as a result of (I) my actions or inactions, (II) the actions or inactions or negligence of others including those parties hereby indemnified; (III) the conditions of the facilities, equipment or areas where the event or activity is being conducted; (IV) the competitive rules; or (V) any other harm caused by an occurrence related to a USAT/USATF sanctioned event; and (G) I grant permission for the use of my name and /or likeness relating to my participation in a USAT/USATF sanctioned event, and waive all right to any future compensation to which I may otherwise be entitled as a result of the use of my name or likeness. I hereby affirm that I am eighteen (18) years of age or older, I have read this document, and I understand its contents.

Signature \_\_\_\_\_

Date \_\_\_\_\_

For persons under the age of 18 years old, the undersigned agrees to the above statements in full on behalf of the participant and assumes all liability. I hereby authorize any licensed physician, emergency medical technician, hospital or other medical or other health care facility (Medical Provider) to treat the minor named herein for the purpose of attempting to tart or relieve any injuries by said minor arising our of or relating to any event sanctioned by USAT/ USATF. I authorize any Medical Provider to perform all procedures deemed medically advisable in attempting to treat or relieve any injuries and consent to the use of anesthesia as deemed advisable during the course of such treatment. I realize and appreciate that there is a possibility of complications and unforeseen consequences in any medical treatment and I assume such risk for and on behalf of myself and said minor.

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

1. Authority to Register and/or to Act as Agent. You represent and warrant to The Active Network, Inc. ("Active") that you have full legal authority to complete this event registration on Active, including full authority to make use of the credit or debit card to which registration fees will be charged. In addition, if you are registering third parties, you represent and warrant that you have been duly authorized to act as agent on behalf of such parties in performing this event registration. By proceeding with this event registration, you agree that the terms of this Registration Agreement shall apply equally to you and to any third parties for whom you are acting as agent. Compliance with Children's Online Privacy Protection Act (COPPA). You represent and warrant that, in compliance with COPPA, you are over thirteen (13) years of age, and that if you are registering a child under fourteen (14) years of age you are the parent of such child, and do hereby consent to the collection of such child's personal information by Active.

2. Limitation of Liability; Disclaimer of Warranties. ACTIVE SHALL NOT BE LIABLE FOR ANY DIRECT, INDIRECT, INCIDENTAL, SPECIAL OR CONSEQUENTIAL DAMAGES, RESULTING FROM (A) THE USE OR THE INABILITY TO USE ACTIVE OR (B) FOR THE COST OF PROCUREMENT OF SUBSTITUTE GOODS AND SERVICES OR (C) RESULTING FROM ANY GOODS OR SERVICES PURCHASED OR OBTAINED OR TRANSACTIONS ENTERED INTO THROUGH ACTIVE OR (D) RESULTING FROM UNAUTHORIZED ACCESS TO OR ALTERATION OF YOUR TRANSMISSIONS OR DATA, INCLUDING BUT NOT LIMITED TO, DAMAGES FOR LOSS OF PROFITS, USE, DATA OR OTHER INTANGIBLE, EVEN IF ACTIVE HAS BEEN ADVISED OF THE POSSIBILITY OF SUCH DAMAGES. YOU EXPRESSLY AGREE THAT USE OF ACTIVE IS AT YOUR SOLE RISK. ACTIVE IS PROVIDED ON AN "AS IS" AND "AS AVAILABLE" BASIS. ACTIVE EXPRESSLY DISCLAIMS ALL WARRANTIES OF ANY KIND, EXPRESS OR IMPLIED, INCLUDING WITHOUT LIMITATION ANY WARRANTY OF MERCHANTABILITY, FITNESS FOR A PARTICULAR PURPOSE OR NON-INFRINGEMENT.

Active makes no warranty that the Active sites' services will be uninterrupted, secure or error free. Active does not guarantee the accuracy or completeness of any information in, or provided in connection with, the Active sites. Active is not responsible for any errors or omissions, or for the results obtained from the use of such information. You understand and agree that any material and/or data downloaded or otherwise obtained through the use of the Active sites is at your own