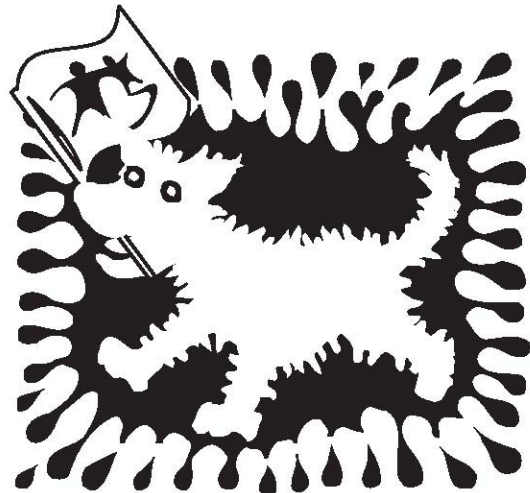


# Sixteenth Annual



**DECATUR JAYCEES**

**Big Brothers Big Sisters of Morgan County**

**WET DOG TRIATHLON**

**Decatur, Alabama**

**400 Meter Swim / 15K Bike / 5K Run**

**July 18, 2015**

**Point Mallard Park**

**2901 Point Mallard Circle, Decatur, AL 35601**

Feel like a Wet Dog at 7:00 a.m. Awards to follow.

**Email:** [wetdog@bbbsmcal.org](mailto:wetdog@bbbsmcal.org) or **Call:** (256) 353-0157

**Register Online At:** [www.active.com](http://www.active.com), keyword "wet dog"





## July 18, 2015 AT 7:00 A.M. (Central)

The Decatur Jaycees and Big Brothers Big Sisters invite you to participate in the 16<sup>th</sup> Annual Wet Dog Triathlon at 7:00 a.m. on July 18, 2015 at Point Mallard Park in Decatur, AL. This race is an excellent first time event. The course is relatively flat and fast with a run along the banks of the Tennessee River.

The proceeds will benefit Big Brothers Big Sisters, a local charity providing guidance and support for the youth in the Morgan, Winston, Cullman, and Lawrence County areas.

## SCHEDULE OF EVENTS

Friday, July 17, 2015

4:00 p.m. – 7:00 p.m. Packet pickup at Academy Sports + Outdoors, located on the Beltline in Decatur, AL. We will be set up in the very far left of the parking lot, behind Buffalo Wild Wings. Special event lodging rates have been secured with the Decatur Morgan County Visitor's Bureau. Please call them directly at 1-800-524-6181.

Saturday, July 18, 2015

5:30 a.m. – 6:30 a.m. Packet pickup and Body Marking will be at the Point Mallard Pavillion

**ABSOLUTELY NO RACE DAY OR DAY BEFORE REGISTRATION. NO BODY MARKING AFTER 6:45 A.M.**

## REGISTRATION

Register by mail or online at [www.active.com](http://www.active.com), keyword "wet dog". Entrants under the age of 15 must be approved by the Race Director before race day (Leah Brown 256-353-0157).

COST	Before July 3, 2015	After July 3, 2015
Individuals	\$55	\$75
Teams	\$145	\$165
Families *	\$45 each member	\$65 each member

\*3 or more members. Note: Family entry forms must be submitted together and relationship noted.

## **RULES**

- Drafting or pack riding is NOT ALLOWED. Enforcement is by course marshals and the honor system. Drafters will be disqualified.
- Assistance is NOT ALLOWED along the course or in the transition area. A sag wagon will be provided if necessary.
- ANSI and/or Snell approved helmets are required. The helmets must be buckled on before mounting the bike and must remain buckled until after dismounting the bike.
- Race numbers must be displayed as instructed at the registration desk. If you cross the finish line without the proper markings, you will be disqualified.
- There will be a mounting area. All competitors must walk their bike from the transition area to the mounting area. All helmets must be buckled before mounting the bike. Upon returning to the mounting area, the biker must dismount their bike in the mounting area. Helmets must remain buckled until after the dismount. Failure to abide by these rules may result in disqualification.
- Bicycle racks will be on a first come, first serve basis.

## **AWARDS**

Awards will be presented to the top 3 overall male and female participants. Awards will be presented to the top male, female, and co-ed relay teams. Age group awards will go to the top 3 male and female in age groups 1-14, 15-19, 20-24, 25-29, 30-34, 35-39, 40-44, 45-49, 50-54, 55-59, 60-64, 65-69, and 70+. Awards will also be presented in the Clydesdale (men over 220 lbs.), Athena (women over 165 lbs.), Masters (over 45 years) and First Timers. First Timers awards 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> overall only.

**NO DUPLICATE AWARDS**

**PLEASE NOTE: AWARDS WILL NOT BE MAILED**

Awards will be presented the day of the event or may be picked up at Big Brothers Big Sisters up to a week following the event date.

## WET DOG TRIATHLON ENTRY FORM

Complete and mail with signed insurance waiver and check to Big Brothers Big Sisters of Morgan County, P.O. Box 2171, Decatur, AL 35602, or Register Online at: [www.active.com](http://www.active.com), keyword "wet dog"

CIRCLE ONE:    TEAM    INDIVIDUAL    FAMILY

\_\_\_\_\_  
LAST NAME, FIRST NAME, MIDDLE INITIAL, or  
TEAM NAME

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
CITY, STATE, ZIP CODE

\_\_\_\_\_  
DATE OF BIRTH

\_\_\_\_\_ / \_\_\_\_\_

AGE (race day)

SEX

\_\_\_\_\_ min. / \_\_\_\_\_ sec.

TIME EXPECTED TO FINISH SWIM

\_\_\_\_\_ / \_\_\_\_\_

\_\_\_\_\_  
EVENING PHONE

\_\_\_\_\_  
DAY PHONE

\_\_\_\_\_  
EMAIL

\_\_\_\_\_  
EMERGENCY CONTACT AND PHONE

PLEASE CIRCLE T-SHIRT SIZE:    S    M    L  
XL    XXL

(Size is not guaranteed – however, we will do our best to provide you with the size requested)

IMPORTANT – INCOMPLETE OR UNSIGNED ENTRY FORMS AND INSURANCE WAIVERS WILL NOT BE ACCEPTED

### COURSE DESCRIPTION

Swim: 0.4 K - The course will involve swimming to and from a buoy in a tributary of the Tennessee River. A swimmer will begin the race every 3-5 seconds to alleviate congestion.

Bike: 15 k - The course is an out and back from the Aquatic Center to Rhodes Ferry Park (next to the bridge for Hwy. 31) on the River, It is primarily flat. Although the police will be on hand, the roads will not be closed. USE CAUTION. Do not disregard traffic laws unless a course marshal or police officer directs you to do so. This direction may involve stop signs at several locations.

Run: 5k – The course will begin along the Point Mallard running trail and return on the asphalt road along the golf course.

### FOR MORE INFORMATION

Websites:

[www.bbbsmcal.org](http://www.bbbsmcal.org), [www.decaturlaycees.com](http://www.decaturlaycees.com)

or [www.active.com](http://www.active.com), keyword "wet dog"

Race Director: Leah Brown (256) 353-0157

Email: [wetdog@bbbsmcal.org](mailto:wetdog@bbbsmcal.org)

Because this is a charity event with proceeds benefitting Big Brothers Big Sisters

No refunds will be given on Registrations

## ACCIDENT WAIVER AND RELEASE OF LIABILITY

I sign this waiver voluntarily. I agree that this release binds my heirs, family, assignees, administrators, and executors. Further, 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, and event monitors, and/or producers but are also present for volunteers. I hereby assume all of the risks of participating and/or volunteering in this event. I realize that liability may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained or controlled by them or because of their possible liability without fault.

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 form will be used by the event holders, sponsors and organizers, in which I may participate and that it will govern my actions and responsibilities at said events.

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, disabilities, personal injury, property damage, property theft or actions of any kind which might occur to me including my traveling to and from this event, THE FOLLOWING ENTITIES OR PERSONS: The Decatur Jaycees, Inc., Morgan County Big Brothers/Big Sisters, any sponsors, and the directors, officers, employees, volunteers, event volunteers, and any employee or agent of the City of Decatur; (B) Indemnify and Hold Harmless the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation in this event, whether caused by the negligence of releases or otherwise.

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

I understand that at this event or related activities, 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 assigns.

The Accident Waiver and Release of Liability 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.

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PRINT PARTICIPANTS NAME

AGE

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SIGNATURE (IF UNDER 18, PARENT OR GUARDIAN MUST SIGN)

DATE

## PARENT GUARDIAN WAIVER FOR MINORS (under 18 years old)

The undersigned parent and natural 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 of the parties referred to above from all liability, loss, cost, claim, or damages 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 parents or legal guardian.

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SIGNATURE OF PARENT OR GUARDIAN

DATE