



2010 RACE INFORMATION SHEET

Information provided below will appear on the Triathlon BC website, and in future issues of TriathlonBC. Please double check information for accuracy.

RACE NAME: _____ EVENT DATE: _____

RACE LOCATION: _____

EVENT WEBSITE: _____

RACE DIRECTOR: _____ PHONE: (_____) _____

EMAIL ADDRESS: _____

MAILING ADDRESS: _____

CITY: _____ POSTAL CODE: _____

RACE DISTANCE(S): KOS SPRINT OLYMPIC HALF OTHER
(circle applicable)

ADDITIONAL DETAILS IF NECESSARY:

SWIM: _____

BIKE: _____

RUN: _____

OTHER: _____

PLEASE NOTE: \$150 EVENT SANCTION DEPOSIT MUST ACCOMPANY EACH EVENT APPLICATION. PLEASE PROVIDE PAYMENT INFORMATION BELOW.

PAYMENT INFORMATION			
CHEQUE ENCLOSED <i>(please circle)</i>	YES	NO	IF ATTACHED, AMOUNT OF CHEQUE: \$ _____
CREDIT CARD PAYMENT <i>(please circle)</i>	YES	NO	CREDIT CARD INFORMATION: VISA MASTERCARD <i>(please circle)</i>
CREDIT CARD NUMBER: _____			
EXPIRY DATE: _____ NAME AS IT APPEARS ON CREDIT CARD: _____			
AMOUNT TO BE CHARGED: \$ _____ SIGNATURE: _____			