

## INDIAN INTERNATIONAL TRIATHLON 2001 – ENTRY FORM

Date: 16 December 2001  
Venue: Chennai, India  
Distance: Olympic – Swim 1.5Km, Bike 40Km, Run 10Km  
Entry Deadline: 30<sup>th</sup> November 2001  
Entry Fee: Nil  
Accommodation: Free accommodation will be provided to all athletes at the Taj Connemara.

### **Personal Details:**

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_  
Passport No: \_\_\_\_\_

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

Category: Elite Senior / Junior / Age Group Country of representation: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ E- Mail: \_\_\_\_\_

Arrival Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Departure Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

### **Flight Details:**

If you supply your flight details, complimentary airport transfer to and from the Official hotel will be arranged.

<b>Arrival</b>	<b>Departure</b>
Time	Time
Flight Nos:	Flight Nos:
No. of accompanying persons	No. of accompanying persons
No. of bags/cycles	No. of bags/cycles

### **Entry Procedure:**

1. Fax your completed entry form to the Indian Triathlon Federation at 0091 44 8520717
2. Upon receipt of your entry, the Indian Triathlon Federation will send you an acknowledgement.

### **Declaration\*:**

I declare that I understand the conditions of the race I have entered, will abide by its rules and regulations and that all the above details are true and correct. I accept that all participants enter at their own risk. Accordingly, on behalf of myself, my heirs and executors, I hereby waive and release all rights or claims for damages I may have against the organizers of the race, their agents, representatives, sponsors and contributors for any illness, injury, death, damage or loss I may sustain during, or as a consequence of, or while traveling to or from, the race.

\*On arrival in India all participants will have to sign a detailed waiver form.

I permit the Indian Triathlon Federation to use the above information in the operation of this activity and to inform me of future activities.

Name in bold & Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Parents signature is necessary for participants aged below 18)

Enquiries: Telephone: 0091-44- 8589574 Fax:0091-44-8520717 Email:  
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