

## PAYMENT INFORMATION

One form per person/relay team. This form may be duplicated.

Method of Payment Enclosed: Check \_\_\_\_\_ Visa \_\_\_\_\_ Mastercard \_\_\_\_\_  
Card Number \_\_\_\_\_  
Ex. Date \_\_\_\_\_ / \_\_\_\_\_ 3 digit # on back \_\_\_\_\_  
Individual \_\_\_\_\_  
Relay Team \_\_\_\_\_  
TOTAL \$ \_\_\_\_\_

Make Checks Payable and Mail to:  
Kettle Moraine YMCA  
1111 W. Washington St. West Bend, WI 53095

### REGISTRATION AGREEMENT AND LIABILITY WAIVER

1. Authority to Register and/or to Act as Agent: You represent and warrant to The Council on Alcohol and Other Drug Abuse of Washington Co. ("The Council") and the Kettle Moraine YMCA ("The Y") that you have full legal authority to complete this event registration on behalf of yourself and/or any party you are registering (the "Registered Parties"), including full authority to make use of the credit or debit card to which registration fees may be charged. As used in this Agreement and Waiver, "The Council" refers to The Council on Alcohol and Other Drug Abuse of Washington County and any and all affiliated entities singly or together and its officers, employees, volunteers, sponsors, contractors, subcontractors and agents. "The Y" refers to the Kettle Moraine YMCA and any and all affiliated entities singly or together and its officers, employees, volunteers, sponsors, contractors, subcontractors and agents.

If you are registering a child between the ages of 13 and 18 or an incapacitated adult you represent and warrant that you are the parent or legal guardian of that party and have the legal authority to enter into this agreement on their behalf and by proceeding with this event registration, you agree that the terms of this Agreement and Waiver shall apply equally to all Registered Parties.

2. Waiver: You understand that participation in the event is potentially hazardous, and that a registered party should not participate unless they are medically able and properly trained. You understand that events will be held over public roads and facilities open to the public during the event and upon which hazards are to be expected. Participation carries with it certain inherent risks that cannot be eliminated completely ranging from minor injuries to catastrophic injuries including death. You understand and agree that in consideration of being permitted to participate in the event, you and any registered party, the heirs, personal representatives or assigns of you or the registered party do hereby release, waive, discharge and covenant not to sue The Council and/or The Y for any and all liability from any and all claims arising from participation in the event by you or any registered party.

3. Indemnification: You agree to indemnify and hold the Council and/or the Y harmless from and against any and all damages, costs, claims or demands, including reasonable attorneys' fees, made by any third party due to or arising from or relating to the violation of any term of this Agreement and Waiver.

By indicating your acceptance of this agreement and waiver, you are affirming that you have read and understand this agreement and waiver and fully understand its terms. You understand that you are giving up substantial rights, including the right to sue. You acknowledge that you are signing the agreement and waiver freely and voluntarily, and intend by your acceptance to be a complete and unconditional release of all liability to the greatest extent allowed by law.

Signature \_\_\_\_\_ Date \_\_\_\_\_

## TRIATHLON AND MARATHON & HALF MARATHON COMBINED PACKET PICKUP

### REGISTRATION CLOSING DATE

Thursday, August 25, 2011

### REGISTRATION & PACKET PICK-UP

Packet pick-up for both events will be held  
Friday, August 26, 2011, from  
4:00pm - 8:00pm at:

West Bend Mutual Insurance Company  
Prairie Center  
1900 S. 18th Avenue  
West Bend, WI 53095

*Packets can also be picked up at the start lines  
of the Marathon and Half Marathon or at Yahr  
Park the morning of the event.*

**If registering for both events deduct  
\$10 from total registration fee.  
Registrations are non-refundable.**

**For more information please visit our  
website at [www.adrenalineraces.org](http://www.adrenalineraces.org).**



[www.adrenalineraces.org](http://www.adrenalineraces.org)

## EISENBahn MARATHON & HALF MARATHON

Saturday, August 27, 2011  
6:00am - Marathon Start  
6:45am - Half Marathon Start  
Fond du Lac and Washington Co.

## ADRENALINE TRIATHLON

Sunday, August 28, 2011 at 7:00am  
Yahr County Park



Sponsored by:



# EISENBahn MARATHON & HALF MARATHON

The Eisenbahn Trail is a 25-mile trail extending from the historic city of West Bend into the scenic countryside of eastern Wisconsin. The full marathon will begin in Eden and will leave the trail periodically onto rural roads. When the participants are off the trail, the course is open and runners should follow open course rules.

The morning of the race, participants will park at the Kettle Moraine YMCA River Shores location in West Bend and will be shuttled to the starting lines. Busses will leave at 5:00am for all full marathon participants and at 5:45am for all half marathon participants. If you miss the bus, you will need to arrange your own drop-off at your respective start line as there is no parking available at the starting lines. Plenty of water/aid stations and Porta Potties will be available along the course. The Finish Line will be located behind the Kettle Moraine YMCA River Shores location and in close proximity to downtown West Bend where Germanfest is held. Participants must be 16 years or older.

## AWARDS

Finisher medals provided along with a technical T-shirt and goodies. Awards will be presented to the Top Males, Females and Age Divisions.

## FEES

### Full Marathon:

\$60 until March 30, 2011  
\$65 from March 31 - June 29, 2011  
\$75 from June 30 - August 18, 2011  
\$100 from August 19 - August 25, 2011

### Half Marathon:

\$50 until March 30, 2011  
\$55 from March 31 - June 29, 2011  
\$65 from June 30 - August 18, 2011  
\$90 from August 19 - August 25, 2011



## ADRENALINE TRIATHLON

### LOCATION

Yahr County Park  
7999 Orchard Valley Rd.  
Town of Farmington

### THE COURSE

The swim is 1/4 mile with a beach front start and plenty of buoys to guide your way. The 15 mile bike heads out of the park and onto the roads through the Kettle Moraine. The 5k run is an out and back run near the park. Both the bike and run courses are on open courses. Swim caps are required and will be provided.

### AWARDS

All participants will get a technical T-shirt and goodies. Awards will be presented to the Top Males, Females, Athenas, Clydesdales, Relay Teams, and Age Divisions.

### FEES

#### Individuals:

\$60 until March 30, 2011  
\$65 from March 31 - June 29, 2011  
\$75 from June 30 - August 18, 2011  
\$100 from August 19 - August 25, 2011

#### Teams:

\$75 until March 30, 2011  
\$80 from March 31 - June 29, 2011  
\$90 from June 30 - August 18, 2011  
\$125 from August 19 - August 25, 2011

**See back for registration and  
packet pick-up information.**

## REGISTRATION

**One form per person/relay team. This form may be duplicated.**

To register online visit our website at [www.adrenalineraces.org](http://www.adrenalineraces.org).

### TRIATHLON AND MARATHON INDIVIDUAL REGISTRATION

First \_\_\_\_\_ Last \_\_\_\_\_  
D.O.B \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_\_ Female \_\_\_\_ Male \_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
E-mail \_\_\_\_\_ Phone \_\_\_\_\_  
Circle T-shirt size: S M L XL XXL Triathlon Only: Athena \_\_\_\_ Clydesdale \_\_\_\_  
 Triathlon  Marathon  Half Marathon

### TRIATHLON RELAY TEAM REGISTRATION

**TEAM NAME:** \_\_\_\_\_

#### SWIMMER

First \_\_\_\_\_ Last \_\_\_\_\_  
D.O.B \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_\_ Female \_\_\_\_ Male \_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
E-mail \_\_\_\_\_ Phone \_\_\_\_\_  
Circle T-shirt size: S M L XL XXL

#### BIKER

First \_\_\_\_\_ Last \_\_\_\_\_  
D.O.B \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_\_ Female \_\_\_\_ Male \_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
E-mail \_\_\_\_\_ Phone \_\_\_\_\_  
Circle T-shirt size: S M L XL XXL

#### RUNNER

First \_\_\_\_\_ Last \_\_\_\_\_  
D.O.B \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age \_\_\_\_\_ Female \_\_\_\_ Male \_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
E-mail \_\_\_\_\_ Phone \_\_\_\_\_  
Circle T-shirt size: S M L XL XXL

**See back for payment and waiver information.**