

WE WELCOME PEOPLE OF ALL FITNESS LEVELS TO PARTICIPATE IN OUR INDOOR TRIATHLON ON SUNDAY, NOVEMBER 17TH

Our YMCA Indoor Triathlon consists of a 20 minute swim in our Y's indoor lap pool, 20 minutes on our stationary cycling bikes and a 20 minute run on one of our treadmills. Our Y's Indoor Triathlon is an opportunity to experience a unique challenge and accomplish an incredible goal.



20 MINUTES IN THE POOL:

Our Indoor Triathlon begins in the pool. Participants will swim for 20 minutes using any type of stroke. Each group of participants will start and end at the same time, signaled by a whistle.

Transition 1: Racers will be given 15 minutes to go to the locker room to take an optional shower and change into clothing suitable for cycling and running.



20 MINUTES ON THE BIKE:

Each participant will bike for 20 minutes on a stationary bike. The exact distance is what counts. Participants may set the resistance, seat height and handlebars to whatever works best for them.

Transition 2: Racers will be given 10 minutes. Participants may choose to bring a change of shoes, a second water bottle, or a snack if needed.



20 MINUTES ON THE RUN:

Runs will take place on the treadmills. Each participant will have 20 minutes on the treadmill to run as far as possible.

Distance is calculated for all three activities and the cumulative distance determines your finishing placement.



KISHWAUKEE FAMILY YMCA
2500 W. Bethany Rd.
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KISHWAUKEE
FAMILY YMCA

INDOOR TRIATHLON

SUNDAY, NOVEMBER 17



INDOOR TRIATHLON

Registration Fee

Individual Fee: Early Bird Registration Fee:
\$35 Member & Program Participant

Registration Fee after November 1
\$50 Member & Program Participant

(Team= 1 runner, 1 swimmer and 1 biker)

Team Fee: Early Bird Registration Fee:
\$45 Member & Program Participant

Registration Fee after November 1
\$60 Member & Program Participant

Team fee includes a t-shirt for each participant!

Register by November 1 to guarantee a t-shirt!

WAVE INFORMATION

Wave times are subject to change. The YMCA will inform you prior to November 17 if there have been any changes to your wave time. There are only 16 slots available for each wave. Register early to reserve your preferred wave. Please provide a valid email address upon registering. All event information will be send via email.

Wave #	Check-in	Swim	Bike	Run
1	8:10 AM	8:30 - 8:50 AM	9:05 - 9:25 AM	9:35 - 9:55 AM
2	8:35 AM	8:55 - 9:15 AM	9:30 - 9:50 AM	10:00 - 10:20 AM
3	9:00 AM	9:20 - 9:40 AM	9:55 - 10:15 AM	10:25 - 10:45 AM
4	9:25 AM	9:45 - 10:05 AM	10:20 - 10:40 AM	10:50 - 11:10 AM
5	9:50 AM	10:10 - 10:30 AM	10:45 - 11:05 AM	11:15 - 11:35 AM

NEW! 8 WEEK TRAINING PROGRAMS



SWIMMING CLUB

Sundays 8:15-9:00am
September 22-November 10
(No training November 3)



CYCLING CLUB

8 weeks
Wednesdays 5:30-6:15pm
September 25-November 13



RUNNING CLUB

8 weeks
Saturdays 8:15-9:00am
September 21-November 9

TRAINING PROGRAM FEES:

Member: \$30/Club

Program Participants: \$40/Club

REGISTRATION FORM

_____ Individual Triathlon _____ Team Triathlon

Captain Name _____

_____ Swimmer _____ Biker _____ Runner

Address _____

City _____

State _____ Zip _____

Email _____

Phone _____

Birthdate _____ Age _____ Gender M / F

T-Shirt Size YS YM YL S M L XL XXL

Team Member 2 _____

Birthdate _____ Age _____ Gender M / F

T-Shirt Size YS YM YL S M L XL XXL

_____ Swimmer _____ Biker _____ Runner

Team Member 3 _____

Birthdate _____ Age _____ Gender M / F

T-Shirt Size YS YM YL S M L XL XXL

_____ Swimmer _____ Biker _____ Runner

Please select preferred wave time:

Wave 1 _____ Wave 3 _____ Wave 5 _____

Wave 2 _____ Wave 4 _____

Waiver & Release

I realize that participating in an endurance race is a potentially hazardous event. I hereby testify that I am medically able to swim, bike, and run. I assume all risks associated with this event including the effects of indoor climates, all such risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I for myself and anyone entitled to act on my behalf, waive and release my rights and claims for damages I may have incurred against all organizers, the YMCA, sponsors and volunteers. I understand and agree to the Waiver and Release.

Signature _____

Guardian Signature _____