



Proudly presents the



AmeliaMan Olympic Distance

at Amelia Island

Sunday, October 17, 2010

5:00 am Transition Opens & Body Marking

7:45 am Race Start

Also the Atlantic Coast Triathlon will start at 7:15 am

Amelia Island - Fernandina Beach, FL

From I-95 – Take Exit 373, turn east onto A1A /Hwy 200 onto Amelia Island.

99 N. Fletcher Ave. Fernandina Beach, FL

Awards (T-Shirts sizes guaranteed to pre-registered only)

Top 3 Overall Individual Male / Female

Top 3 Overall Masters (40+) Male / Female

Clydesdale (Men 200+ lbs) & Athena (Women 150+ lbs)

Relay Teams, Fat Tire, & Military / PSO Categories

Medals 3 Deep in 5 year Age Groups (14-under thru 85-up)

Entry Fees are Non-Refundable & Non-Transferable

Category	Pre-Registered (Recv. by July 1 st)		Registration (Recv. by August 1 st)		LATE Registration (If available after Aug 1 st)	
	USAT	Non-USAT	USAT	Non-USAT	USAT	Non-USAT
	Individual					
Clydesdale						
Athena	\$95	\$105	\$120	\$130	\$140	\$150
Fat Tire						
Military/PSO						
Relay Teams	\$190	\$220	\$240	\$270	\$280	\$310



Swim 1.5K - Bike 40K - Run 10K

Information & Results

www.drcsports.com

Register on-line:

www.lmAthlete.com

Contact DRC Sports email: info@drcsports.com

Phone (352) 637-2475

checks payable to: DRC Sports

USAT# _____ Total Enclosed: \$ _____

Mail to: DRC Athletic Event Mgt.

P.O. Box 70

Inverness, FL 34451-0070

Pasta Dinner Tickets: Qty _____ X \$10.00

T-SHIRT SIZE () S () M () L () XL () XXL is \$2 extra

NAME _____ AGE _____ SEX _____ DOB _____ / _____ / _____
(ON 12/31/2010)

ADDRESS _____ E-MAIL (Optional) _____
(Your email is used only for updating or notifying you of upcoming races)

CITY _____ STATE _____ ZIP _____ PHONE () _____

INDIV: ___ CLYDE: ___ ATHENA: ___ FAT TIRE: ___ MILITARY/PSO: ___ RELAY: ___ RELAY TEAM NAME: _____

AMELIAMAN RELEASE WAIVER: I understand that Entry Fees are Non-Refundable & Non-Transferable.

In consideration of accepting this entry, I, the undersigned, intending to be legally bound, hereby, for myself, my heirs, executors and administrators, waive and release any and all rights and claims for losses and damages I may have against DRC Athletic Event Mgt, the Florida Park Service, the sponsors of the race and/or officials of said event, volunteers, town, police, lifeguard, fire department, and their representatives, successors and assigns for any and all injuries suffered by me in said event. I attest and verify that I am physically fit and sufficiently trained for the competition of this event, and that a licensed medical doctor has verified my physical condition. I know that participating in this event is potentially a hazardous activity. I should not enter unless I am medically able and properly trained. I agree to abide by any decisions of race officials relative to my ability to safely complete the course. I understand that I may be issued a timing chip for use during the event and that I am responsible for returning the chip after the event or agree to pay a replacement fee of \$30. I assume all risks associated with participating in this event including, but not limited to, falls, contact with other participants, the effects of the weather, including heat and/or humidity, traffic and conditions of the road. I understand that the course is open to vehicular traffic and will compete with due care. Further, I hereby grant full permission to any and all of the foregoing to use any email, photographs, videotapes, motion pictures, recording or any other record of this event for any purpose whatsoever.

SIGNATURE (Parent if under 18 years of age) _____ DATE _____

For Office Use Only

Method of Payment: Cash _____ Check # _____ Date Received: _____ Amt: _____ By: _____