



# The 25th Year!

## Jordan Valley Triathlon

This event endorsed by



MICHIGAN FITNESS FOUNDATION  
www.michiganfitness.org

www.ejems.com

- 1st EVENT: **SWIMMING** 0.3 miles in Lake Charlevoix
- 2nd EVENT: **CYCLING** 19.9 miles on paved rolling hills
- 3rd EVENT: **RUNNING** 3 miles on paved roads

The events will begin at the East Jordan Tourist Park located on M-66 Highway approximately 0.1 miles north of the M-66/M-32 intersection. Swimmers will be permitted to wear wetsuits. Bikers **MUST** wear protective helmets or be disqualified. Anyone caught drafting on the bike course will be disqualified by biking officials on the course. There will be no support vehicles allowed on the bike course. Refreshments will be available on the running course and after the race.

**IMPORTANT: This Triathlon has 2 different stage areas - race officials will transport race gear from first stage to the bike to run stage.**

NOTE: Race packet pickup & late registration will be held Saturday, **June 26, 2010** from **7:30-8:30 a.m.** at the **Tourist Park**. **All competitors must check in and receive race numbers before 8:45 a.m. THE RACE WILL START AT 9:00 a.m., SATURDAY, JUNE 26, 2010.**

Course maps available at registration or at the E.J. Chamber of Commerce office.

**AWARDS/SPECIAL AWARDS: Top 15% of finishers in each age group; overall First Place men and women. Shirts for all participants.**

Race results will be posted on the web at www.ejchamber.org. or at 3disciplines.com

*All proceeds will benefit the East Jordan Ambulance Association, a 501C3 non-profit organization*

### OFFICIAL ENTRY FORM

ENTRY FEE: \$55.00 Early Entry fee, if received by June 1.  
 \$65.00 (no refunds), if received by June 22 - Triathlon T-shirt guaranteed.  
**NEW** \$75.00 Entry fee for **3 person team** (register by June 1, 2009)

Please CIRCLE appropriate size:      SMALL      MED      LARGE      X-LARGE      XX-LARGE

**LATE REGISTRATION FEE WILL BE \$65.00 INDIVIDUAL AND TEAM REGISTRATION FEE WILL BE \$85.00 THE DAY OF THE EVENT.**

I AM PAYING BY ONE OF THE FOLLOWING:

CHECK (Payable to: **EAST JORDAN AMBULANCE ASSOCIATION**)

CREDIT CARD:     Mastercard     Visa

Name on Card: \_\_\_\_\_ Exp. Date: \_\_\_\_/\_\_\_\_

Card #: \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

CW#: (Last 3 digits on signature line on back of card) \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ Email Address: \_\_\_\_\_

Name: \_\_\_\_\_ Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_ Male:  Female:

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Send to: East Jordan Ambulance Association, P.O. Box 223, East Jordan, MI 49727**

Competitors must be 15 years of age or older at the time of the event. The classifications for both male and female are (**CIRCLE ONE PLEASE**):

- |             |             |             |               |               |             |             |
|-------------|-------------|-------------|---------------|---------------|-------------|-------------|
| 15-19 years | 20-24 years | 25-29 years | 30-34 years   | 35-39 years   | 40-44 years | 45-49 years |
| 50-54 years | 55-59 years | 60-64 years | 65 years/over | 3 Person Team |             |             |

**ChampionChip ID** \_\_\_\_\_

**Timing/Results:** ChampionChip timing will be offered this year to provide you with professional and accurate results. If you do not own your own ChampionChip, one will be provided to you race morning. This chip will be collected from you once you cross the finish line. Failure to turn in this chip will result in a \$35.00 fee.

In consideration of your accepting my entry, I, intending to be legally bound, do hereby for myself, my heirs, executors and administrators, waive and release forever any and all rights and claims or damages I may accrue against the sponsors of this event, the officials, all municipalities, special districts and properties, private or public, or their representatives, for any and all injuries suffered by me while traveling to and from participating in the Jordan Valley Annual Triathlon.

Participant Signature: \_\_\_\_\_

Parent or Guardian Signature (if participant is under 18 years) \_\_\_\_\_

## TRIATHLON ROUTE

- Registration and Swim:** East Jordan Tourist Park, (M-66)
- Cycling Course:** M-32 east across bridge to Main St.  
Left on Main St.  
Left at Division St.  
Follow Boyne City-Advance Rd.  
right at the fork.  
Left at Advance on Ferry Rd.  
Left on Peninsula Rd.  
Right on Main St. to Transition area,  
(corner of Main and Nichols)
- Running Course:** Second Street to Division Street  
Right on Division to Turn Around Point  
Back to Transition Area



**East Jordan Ambulance Association**  
P.O. Box 223  
East Jordan, MI 49727

BULK RATE  
U.S. POSTAGE  
PAID  
East Jordan, MI  
Permit No. 21