

Midnight Man Triathlon

18th/19th August 2012

3.8k swim/112k bike/42.2krun

Thank you for entering the Midnight Man Triathlon. If you are entering as a team can you all fill in one form each and send them together. Please print clearly

Name.....Date of birth.....Age.....

Address.....
.....

Postcode.....Country.....Male/Female.....

Contact number.....Team Name.....

Club Name.....BTF No.....

Emergency contact name (Person cannot be racing).....

Emergency contact number.....

Doctor's name and address.....

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Have you been treated for any significant medical conditions in the last 12 months?
(If yes, please provide further details).....

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Are you a carrier of Hepatitis B, HIV or any other infectious disease?
(If yes, please provide further details).....

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Have you previously required medical treatment following or during an endurance event?:
(If yes, please provide further details).....

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Do you wear prescription eyewear.....

What size T-shirt do you want and you can also choose your finishing shirt. You can have a Midnight Man or Midnight Woman top.

Midnight Man S M L XL

Midnight Woman S M L XL

All Finishers medals will say Midnight Man

Make your cheque (£160 or £180 for a team) payable to Bridge Triathlon Dartford and send it to Midnight Man Triathlon 132 High Street, Welling, Kent, DA161TJ
We will then add you to the start list and send you a confirmation e-mail.