

Michelle's Memorial Triathlon is a sprint-distance triathlon - or short-course triathlon.

Michelle's Tri is open to athletes of all abilities. It would make for a great first triathlon or something more competitive for a seasoned athlete. The event will be chip-timed with results, a meal and awards following the race.

Distance
Swim: 500 meters
Bike: 14 miles
Run: 5K



RRFS Director: Ronda Graff
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McCook YMCA, 901 West E
McCook NE 69001

WWW.REPUBLICANRIVERFITNESSSERIES.COM

The Republican River Fitness Series (RRFS) has been developed because we have a passion for wellness, for participation, for developing a healthy and active lifestyle for ourselves and more importantly for our community.



Michelle's Tri is an event for both the Republican River Fitness Series and the Platte River Fitness Series, with individual triathlon participants earning points for both series. Participation points are not awarded to members of triathlon teams.

Sponsored by:

DEVENY

MICHELLE'S MEMORIAL TRIATHLON



Saturday June 22, 2019
McCook

Michelle's Memorial Triathlon is a sprint triathlon in celebration of the life of Michelle Walters. Michelle's philosophy of "If not now, when?" will be the centerpiece of this triathlon.





Michelle's Tri will start and finish at
McCook City Pool, 500 East M St.,
McCook, Nebraska.

Packet pickup is 7:15 a.m.

Pre-race meeting is 8:15 a.m.

Race start is 8:30 a.m.

More information and online
registration available at
www.republicanriverfitnessseries.com
or forms can be turned in at the
McCook YMCA or the North Platte
Rec Center.



REGISTRATION
DEADLINE: FRIDAY,
JUNE 21ST, 10:00 P.M.
(No race-day entries)

INDIVIDUAL REGISTRATION: \$45.00

An individual participant is anyone wanting to complete the entire triathlon by themselves. Swim or walk in the pool for 500 meters, bike 14 miles and finish with a 5K run/walk.

Name: _____

Birth Date: ____/____/____ Gender: M F Phone number: _____

Email: _____ Address: _____

TEAM ENTRY: \$99.00

This entry is for a 3-person team. One swimmer, one biker and one runner. The swimmer will swim or walk in the pool for 500 meters, then biker will bike 14 miles, then runner or walker will cover the 5K.

Team name: _____ Captain name and phone number: _____

Name (Swimmer): _____ Email: _____

Name (Biker): _____ Email: _____

Name (Runner): _____ Email: _____

Waiver of Liability: In consideration of this entry, I, the signee, intending to be legally responsible for myself, my heirs, my executors and administrators, waive and release all claims for damages I may have against the Republican River Fitness Series and its board of directors, Community Hospital, Ed Thomas YMCA, Deveny Motors and all other organizations sponsoring this race and their representatives, successors and assigns for any and all injuries, suffered by in me in said event. Every participant must sign as well as parent/guardian for those 19 and under. Signature accepting waiver:

X _____

X _____

X _____

Fees - Individual \$45 (Includes one meal): _____ Team Relay \$99 (Includes meal for each member): _____

Extra meals: ____ x \$9 = \$ _____

Total fee: \$ _____