



Registration Form



Registrant Name: _____ Date of Birth: _____

Mailing Address: _____

Phone Number: _____ Email: _____

Please register me for: _____ (Date(s) of Triathlon)

Remember this is a fundraiser to support amazing year-round sport and recreation opportunities for people with disabilities. You could become an "Adaptive Hero" or even an "Adaptive Super Hero" by fund-raising over \$250 or over \$500 respectively!

- Individual** – I will **Kayak or Canoe** 0.75-mile paddle on Echo Lake, **Bike** 6.5 mile bike ride from the Tram to the Flume **Hike/roll** 2-mile hike or roll around the Flume Gorge.

My disability is: _____ I do not have a disability ____

Individual Registrant Details:

- \$75 entry fee is enclosed.
- FUNDRAISE ENTRY AMOUNT - I agree to raise AT LEAST \$75 for my entry fee
- I will / will not (Circle One) need ASPNC volunteers to help me with this challenge.
- T-shirt size: Youth or Adult (Check One) __ small __ med __ large __ X-large __ XXL

- Team of 3** – My Team will **Kayak or Canoe** 0.75-mile paddle on Echo Lake, **Bike** 6.5 mile bike ride from the Tram to the Flume **Hike/roll** 2-mile hike or roll around the Flume Gorge. Team Members Information:

Team Member #2 Information:

- Name: _____ Date of Birth: _____
- Address: _____
- Phone Number: _____ Email: _____
- Disability: _____ I do not have a disability ____

Team Member #3 Information:

- Name: _____ Date of Birth: _____
- Address: _____
- Phone Number: _____ Email: _____
- Disability: _____ I do not have a disability. ____

We will / will not (Circle One) need ASPNC volunteers to help our team with this challenge.

Entry Fee (Select 1):

____ \$150 entry fee is enclosed. ____ I agree to fundraise AT LEAST \$150 for my entry

Adaptive Sports Partners of the North Country
PO Box 304, Franconia, NH 03580 ~ 603-823-5232 ~ info@adaptivesportspartners.org
501(c)3 Nonprofit Public Charity ~ ID #27-1338965

Inspired by Participants ~ Nurtured by Volunteers ~ Sustained by Partners