



New York  
Community Bank

Member FDIC



# Junior Triathlon Training Program

• SWIMMING •  
• BIKING • RUNNING  
• TRANSITION •  
for youth ages 8 through 13

## Instruction in all elements of the triathlon

An orientation session followed by six training sessions conducted every Saturday afternoon (4:30 PM to 6:00 PM) from July 15 through August 19.

All training sessions at Theodore Roosevelt Memorial Park, 2 Shore Avenue, Oyster Bay.

Participants will learn correct form in swimming, biking and running, proper nutrition, hydration, proper footwear, apparel, bike accessories, etc., and the importance of training in an educational and FUN setting.

Training Program will lead up to participation in the Runner's Edge-TOBAY Junior Triathlon on Sat., August 26.

**Space is limited.  
Sign Up Today!**

Program Fee: **\$60** for the entire Training Program! (Make checks payable to "GLIRC") There is a separate entry fee for the Runner's Edge-TOBAY Junior Triathlon. You can register at [glirc.org](http://glirc.org)  
**FOR MORE INFORMATION:**  
Call Greater Long Island Running Club at (516)349-7646



## PROGRAM CO-DIRECTORS:

**DEBORAH BLAIR**  
Chief Administrator and Head Coach of Nassau County's Run Smart and Run Start Training Programs, USAT&F Level 1 certified coach



DEBORAH BLAIR

**BOB COOK**  
Multi-time Ironman Triathlon finisher and owner of The Runner's Edge in Farmingdale



BOB COOK

## KICKOFF MEETING:

June 14 at 7:00pm  
Old Bethpage Restoration

**CLINICS:** Saturdays from 4:30 to 6:00  
July 15, 22, 29, August 5, 12 & 19

**Participants must be able to swim 25 yards unattended and be able to ride a 2 wheel bike comfortably.**

**REGISTER ONLINE AT:** <https://runsignup.com/Race/NY/OysterBay/JuniorTriathlonTrainingProgram>

## New York Community Bank Junior Triathlon Training Program

Please fill in this form and return with your \$60 check payable to GLIRC, Att: Junior Tri, 101 Dupont Street, Suite 24, Plainview NY 11803

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_ TOWN \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE ( ) \_\_\_\_\_ email \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE (as of 7-15-17) \_\_\_\_\_ [ ] Male [ ] Female Shirt Size(circle one): Youth S M L / Adult S M L

**WAIVER, RELEASE AND INDEMNIFICATION FORM (PLEASE READ CAREFULLY BEFORE SIGNING):** In consideration of the acceptance of my child's entry in the Program, for myself, my child, and for my heirs, next of kin, administrators, executors, successors and assigns, I hereby waive and release any and all claims, demands, and causes of action that I might have against the Town of Oyster Bay, the Greater Long Island Running Club, New York Community Bank, their employees, agents, and volunteers, for any and all injuries and bodily harm arising out of my child's participation in the Program, whether or not arising out of the active or passive negligence of any one or more said organizations or individuals. I hereby consent that my child shall receive such medical treatment which may be deemed advisable by the program staff in the event of injury or illness during the course of the Program. I hereby grant permission to the Town of Oyster Bay and the Greater Long Island Running Club to use any photographs, videos, motion pictures, recordings, and any other record of the program and my child's participation in same for any purpose whatsoever.

PARENT'S NAME \_\_\_\_\_

PARENT'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_