



## ANNUAL MEMBERSHIP APPLICATION

“Developing, promoting and supporting the sport of Triathlon in British Columbia”

### JOIN TRIATHLON BC:

- To foster regional development, support the development of youth, and increase sport education opportunities
- To receive our in-house, biannual, TriathlonBC magazine
- To receive discounts at affiliated business
- To participate, and be ranked in the Provincial Race Series
- To take part in Special Events: silent auction, awards nights, AGM
- To access Triathlon BC resources (educational materials)
- To be eligible for Provincial and National Teams, and awards
- To compete in the BC Summer, Western Canada and Canada Games
- To receive entry discounts for safe, sanctioned, quality events!

### MISSION STATEMENT

**DEVELOP** – Triathlon BC will use available skills and resources to give back to its stakeholders – developing the sport by investing back in the community.

**PROMOTE** – Triathlon BC will produce an annual Race Series to promote participation and friendly competition in all regions of British Columbia, recognizing races with a high basic standard. Triathlon BC will promote the sport by creating and improving brand awareness, using all forms of communication media available to reach out to its current and potential membership.

**SUPPORT** – Triathlon BC will support sanctioned races to meet an improved basic standard for the benefit of all members. Triathlon BC will increase both the adult and youth membership and provide resources and opportunities for new and existing coaches, recognizing that coaches are fundamental to the growth of the sport at all levels.

### ANNUAL MEMBERSHIP FEES

#### INDIVIDUAL MEMBERS (not attached to a club):

Adult	\$45	<input type="checkbox"/>
Kids Aged 6-19yrs. (K.O.S®/Junior)	\$10	<input type="checkbox"/>

#### AFFILIATED CLUB MEMBERS: (attached to an affiliated club)

Adult	\$35	<input type="checkbox"/>
Kids Aged 6-19yrs. (K.O.S®/Junior)	\$10	<input type="checkbox"/>

#### TECHNICAL (Officials/Race Directors Only, non-competing) FREE

Please note, the Technical Membership is restricted to Officials/Race Directors only, and does not allow for competition.

**ELITE/JUNIOR ELITE CARDING REQUESTS:** Please refer to the Triathlon BC website for detailed criteria.

Membership includes insurance for residents of British Columbia who are already covered by a federal/provincial health care plan, competing in sanctioned training or racing events.

### MEMBERSHIP APPLICATION (PLEASE PRINT)

<input type="text"/>	<input type="text"/>	<input type="text"/>
Last Name	First Name	Sex

<input type="text"/>	<input type="text"/>	YES	NO	YES	NO
year / month / day	Previous Membership #	New Address?		New Member?	
Date of Birth					

<input type="text"/>	<input type="text"/>	<input type="text"/>
BC Street Address / Apt. # / P.O. Box	City	Postal Code

<input type="text"/>	<input type="text"/>	<input type="text"/>
Home Phone	Work Phone	Cell Phone

<input type="text"/>	<input type="text"/>
E-mail Address	Triathlon BC-Affiliated Club

Would you like to receive the TriathlonBC magazine? YES NO

Would you like to receive electronic Updates and Magazines? YES NO

### RELEASE AND INDEMNITY (PLEASE READ CAREFULLY)

I, the applicant, on behalf of myself, members of my family, my heirs, executors, administrators and assigns, hereby forever release, discharge, and hold harmless Triathlon British Columbia representatives and agents for any injury, loss or damage to my person or property, howsoever caused, arising out of any connection with taking part in Triathlon British Columbia organized events and activities and notwithstanding that the same may have been contributed to or associated by the negligence of Triathlon British Columbia representatives or agents. I realize that, with this membership, I may be subject to unannounced drug testing as provided for by Triathlon Canada's agreement with the Canadian Centre for Ethics in Sport.

In witness thereof, I have hereunder set my hands this day

\_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_

Printed Name: \_\_\_\_\_

Member Signature: \_\_\_\_\_

#### IF UNDER THE AGE OF 19

Name of Parent/Guardian: \_\_\_\_\_

Signature of Parent/Guardian \_\_\_\_\_

Witness Name: \_\_\_\_\_

Witness Signature: \_\_\_\_\_

#### MAIL TO:

Triathlon BC  
PO Box 34098 Station D  
Vancouver, BC V6J 4M1

E: [info@tribc.org](mailto:info@tribc.org)

W. [www.tribc.org](http://www.tribc.org)