

# Escape from Alcatraz Corporate Challenge Relay

## The Race

For one weekend each summer, the world's best triathletes assemble in San Francisco for one of the most infamous and extreme sporting events...the **Accenture Escape from Alcatraz Triathlon**. In its 29 years as a maximum-security prison, no one ever escaped alive from the menacing shores of Alcatraz. But every year this popular event draws thousands of athletes and spectators alike to see who can accomplish that daunting task.

Packed with heart-pounding action, the **2008 Accenture Escape from Alcatraz Triathlon** features a 1.5 mile swim through frigid waters from Alcatraz Island to shore, a grueling 18-mile bike race, and a demanding 8-mile run through the rugged trails of the Golden Gate Recreational Area. Set against the natural beauty of San Francisco, this thrilling triathlon is a virtual postcard of the City by the Bay.

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## Team Entry

The Corporate Challenge is an "event within an event" at the Accenture Escape from Alcatraz Triathlon. Competitors are competing collectively on behalf of their company or organization. Each company or organization **MUST enter at least two teams to compete**. Entry fees are \$900 per team. Each team must be comprised of three members: a swimmer, cyclist and runner.

Entry fees include:

- Entry into the race
- Athlete Gift Bag
- Corporate Relay Meet & Greet and Clinic with Pro
- Access to the Corporate Relay Hospitality Tent
- Team Name on Event Website ([www.escapefromalcatraztriathlon.com](http://www.escapefromalcatraztriathlon.com))

Teams will be scored by the two fastest times of all relay teams entered per company. The company with the fastest combined times will be awarded the "Keys to the Rock" Corporate Challenge Cup. Honorable mention trophies will be awarded to the fastest male, female, and co-ed team.

## Corporate Challenge Relay

The Corporate Challenge Relay is an important element of the Accenture Escape from Alcatraz Triathlon promoting teamwork, a healthy workforce, corporate health and maintaining a work/life balance. The Corporate Challenge Relay is an opportunity for workmates to participate in a social atmosphere outside of the workplace, while promoting a healthy, active lifestyle.

The Corporate Challenge Relay also provides an opportunity for positive competition among corporate teams, as well as a chance to network within the business community. Your rival on the racecourse could be your next partner in business. The Corporate Challenge Relay aims to foster positive relationships among teammates and corporate opponents.

Corporate Teams will compete for the "Keys to the Rock" Corporate Challenge Cup. This perpetual trophy will reside for the year at the winning company or organization's offices. The winning company or organization is invited back the following year to defend their title and retain all the bragging rights that go along with it.

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## Schedule

Corporate Challenge Registration

February 1 – May 1, 2008

Registration forms available at

[www.escapefromalcatraztriathlon.com](http://www.escapefromalcatraztriathlon.com)

Corporate Challenge Meet & Greet w/Pro

June 7, 2008: 2pm – 4pm

Marina Green

Corporate Challenge Race Start

June 8, 2008: 8 am

Trophy presentation following race

Fitness Festival

June 7, 2008: 11am – 7pm

June 8, 2008: 7am – 3pm

Marina Green

## 2008 Escape from Alcatraz Corporate Challenge Relay Team Application

IMG and the Accenture Escape from Alcatraz Triathlon would like to personally invite you to join us as a participant in the 2008 Escape from Alcatraz Corporate Challenge Relay. The Corporate Challenge offers a unique opportunity to compete against your friends in the business community in one of the most infamous and extreme sporting events in the world.

The following pages include information about the Corporate Challenge as well as registration forms and liability waivers. Please note the following:

- These forms are for registration for Corporate Relay Teams to compete against other Corporate Teams for a chance to win the “Keys to the Rock” Corporate Challenge Cup. If you would like to enter as a regular open relay team that competes against other individuals and relay teams for the age-group trophies, please visit [www.TriCalifornia.com](http://www.TriCalifornia.com).
- The Corporate Challenge is an "event within an event" at the Accenture Escape from Alcatraz Triathlon. Competitors are competing collectively on behalf of their company or organization. **Each company or organization MUST enter at least two [2] teams to compete.** The Corporate Challenge Relay encourages companies and organizations to form as many teams as they can. This event is designed to encourage friendly competition and corporate team building.
- EACH MEMBER of a relay team must read, sign, and return the two [2] attached liability forms.
- Registration is open from February 1, 2008 to May 1, 2008. Teams who register and submit payment before April 1<sup>st</sup> will receive their team name on the Corporate Challenge t-shirt.
- Fifty [50] teams will be admitted to the Corporate Challenge on a first-come-first-serve basis. After fifty [50] teams have been filled, the remaining will be placed on a waiting list. Additional teams (over 50) will be admitted based on the number of teams on the waiting list. *Team registration will be complete **only** after a company or organization has entered a minimum of two [2] teams and has paid in full with completed registration forms and waivers.*

We appreciate your interest in the Escape from Alcatraz Corporate Challenge. We look forward to seeing you on the race course in June. Please feel free to contact us with any questions or concerns you may have.

Thank you,

Lisa Jenkins  
Event Director, IMG  
[Lisa.Jenkins@IMGWorld.com](mailto:Lisa.Jenkins@IMGWorld.com)

Kelly Dredge  
Event Manager, IMG  
[Kelly.Dredge@IMGWorld.com](mailto:Kelly.Dredge@IMGWorld.com)

# 2008 Escape from Alcatraz Corporate Challenge Relay Team Application

**APPLICATIONS WILL NOT BE ACCEPTED BEFORE FEBRUARY 1, 2008!**

An application for entry will be accepted only when the following criteria are met:

- ✓ The Team Application is 100% complete with all questions answered
- ✓ Each team member has completed and signed the two [2] attached waivers
- ✓ Payment has been processed in full
- ✓ A company or organization has entered and paid in full for **AT LEAST TWO [2] TEAMS**

**Company:** \_\_\_\_\_ **Team Name:** \_\_\_\_\_

## Competitors' Information

### SWIMMER

First \_\_\_\_\_ Last \_\_\_\_\_

Email: \_\_\_\_\_

DOB: \_\_\_\_\_ Sex:            Male            Female

Shirt Size:    Small            Med            Large            XLarge

USAT Member?    Yes: Membership Number \_\_\_\_\_  
                          No: \$10 one-time membership fee (\*add to total below)

### CYCLIST

First \_\_\_\_\_ Last \_\_\_\_\_

Email: \_\_\_\_\_

DOB: \_\_\_\_\_ Sex:            Male            Female

Shirt Size:    Small            Med            Large            XLarge

USAT Member?    Yes: Membership Number \_\_\_\_\_  
                          No: \$10 one-time membership fee (\*add to total below)

### RUNNER

First \_\_\_\_\_ Last \_\_\_\_\_

Email: \_\_\_\_\_

DOB: \_\_\_\_\_ Sex:            Male            Female

Shirt Size:    Small            Med            Large            XLarge

USAT Member?    Yes: Membership Number \_\_\_\_\_  
                          No: \$10 one-time membership fee (\*add to total below)

# 2008 Escape from Alcatraz Corporate Challenge Relay Team Application

## Contact Information

(please choose one team member or administrator to be the main contact for the event)

First \_\_\_\_\_ Last \_\_\_\_\_

Email: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Eve Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

Medical Contact: \_\_\_\_\_

Day Phone: \_\_\_\_\_ Eve Phone: \_\_\_\_\_

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## Payment Information

Entry Fee: \$ 900.00

USAT Membership Fee – up to \$30 \$ \_\_\_\_\_  
(\*total from above)

Additional donation to Challenged Athletes \$ \_\_\_\_\_

**TOTAL AMT DUE:** \$ \_\_\_\_\_

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## Billing Information

Card Type: VISA MC AMEX (circle one) Credit Card #: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Code: \_\_\_\_\_ (3-digit code on back of card or 4-digit code on front of AMEX)

Name on Card: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State : \_\_\_\_\_ Zip: \_\_\_\_\_

Or send check payable to:

IMG

1640 S. Sepulveda Blvd, Suite 222, Los Angeles, CA 90025

Attn: Escape from Alcatraz Corporate Challenge

Scan and email completed forms to: [lisa.jenkins@imgworld.com](mailto:lisa.jenkins@imgworld.com) (best option)

or

Fax completed forms to 310-473-3914 or mail to address above

# USAT Waiver 2008

**READ THIS DOCUMENT (THE "WAIVER AGREEMENT") CAREFULLY BEFORE SIGNING. THIS WAIVER AGREEMENT WILL AFFECT YOUR LEGAL RIGHTS AND WILL LIMIT OR ELIMINATE YOUR ABILITY TO BRING A FUTURE LAWSUIT.**

I understand and acknowledge that I am legally agreeing to the statements in the following paragraphs of this Waiver Agreement by affixing my signature below and that these statements are being accepted by USA Triathlon (hereinafter "USAT") in consideration for (i) allowing me to become a member of USAT, (ii) issuing me a single event license or permit, and/or (iii) permitting me to participate in any USAT sanctioned event; and I further understand and acknowledge that my statements are being relied upon by race sponsors, organizers, administrators, volunteers and other parties defined below as the "Released Parties."

1. I acknowledge that a triathlon, duathlon, or other multi-sport event (hereinafter "Event") is an extreme test of a person's physical and mental limits and carries with it the potential for death, serious injury, and property damage. I acknowledge and agree that it is my responsibility to determine whether I am sufficiently fit and healthy enough to safely participate in an Event, and I attest and certify that I am or will be sufficiently fit and physically trained to participate in any Event which I elect to enter. I have no physical or medical condition which would endanger myself or others if I participate in any Event, or would interfere with my ability to safely participate in any Event. I accept responsibility for the condition and adequacy of my competition equipment and my conduct in connection with any Event. I understand and acknowledge the dangers associated with the consumption of alcohol and/or drugs before, during and after any Event and I recognize that consumption of alcohol and/or drugs might impair my judgment and/or motor skills. I assume full responsibility for any injury, loss or damage associated with my consumption of alcohol and/or drugs.
2. On behalf of myself, my executors, administrators, heirs, next of kin, successors and assigns, and anyone else who might sue on my behalf, I HEREBY WAIVE, RELEASE, and FOREVER DISCHARGE USAT, all Event sponsors, Event producers, Event staff, administrators, officials, contractors, vendors, and organizers (including race directors), volunteers, all other persons or entities involved with an Event, states, cities, towns, and other governmental bodies and locations in which an Event or portions of an Event takes place, and the officers, directors, employees, agents, insurers, other participants and representatives of all of the above (collectively, the "Released Parties"), from any and all claims, causes of action, damages, losses (economic and non-economic), and liabilities of every kind (collectively "Claims"), for death, personal injury, or property damage, which may arise out of, result from, or relate to my participation in, or my traveling to or from, any USAT sanctioned Event, including but not limited to any Claims for theft, damage to any equipment, negligence, partial or permanent disability, Claims relating to the provision of first aid, medical care, medical treatment, or medical decisions (at an Event site or elsewhere), and any Claims for medical or hospital expenses.
3. I acknowledge and ASSUME ALL OF THE RISKS and aspects of an Event. I acknowledge that running, bicycling, swimming and other portions of an Event are inherently dangerous and I understand that I will be participating in an Event at my own risk, that I am responsible for the risk of participation in an Event, and that I am waiving and releasing my legal rights to sue for any injury or damages arising out of or resulting from my participation in an Event. I further understand that any injury or damages incurred may be the result of negligence, omission or carelessness by the Released Parties.
4. I FURTHER COVENANT and AGREE NOT TO SUE any of the Released Parties for any of the Claims that I have waived, released, or discharged herein. I AGREE TO INDEMNIFY and

HOLD HARMLESS the Released Parties from any and all expenses incurred, Claims made, or liabilities assessed against them, including but not limited to attorneys' fees and litigation expenses, arising out of or resulting from, directly or indirectly, in whole or in part, my breach or failure to abide by any part of this Waiver Agreement, my breach or failure to abide by any of USAT's Competitive Rules, and my actions or inactions which cause injury or damage to any other person.

5. I AGREE to abide by the Competitive Rules adopted by USAT and the Guide to Prohibited Substances and Prohibited Methods of Doping adopted by the United States Anti-Doping Agency. I AGREE that prior to participating in an Event I will inspect the race course, facilities, equipment, and areas to be used, and if I believe or become aware that any are unsafe, I will immediately advise the Race Director. I FURTHER GRANT to Event organizers, USAT, and their licensees the right, permission, and authority to use my name, voice, picture, or photograph, in any broadcast, telecast, commercial advertisement, promotion, or other account of an Event, and I WAIVE any rights to future compensation to which I might otherwise have been entitled for such use.
6. The parent or legal guardian who signs the Waiver Agreement on behalf of a minor, incapacitated and/or mentally challenged person (hereinafter "Said Person"), hereby acknowledges that he or she has the legal capacity and authority to act on behalf of Said Person to legally bind Said Person to the Waiver Agreement. The parent or legal guardian who signs the Waiver Agreement agrees to indemnify and hold harmless the Released Parties for any expenses incurred, Claims made, or liabilities assessed against them, as a result of any insufficiency of legal capacity or authority to act on behalf of Said Person in the execution of the Waiver Agreement.
7. If any provision of this Waiver Agreement shall be unlawful, void, or for any reason unenforceable, then that provision shall be deemed severable from this Waiver Agreement and shall not affect the validity and enforceability of any remaining provisions.

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Signature

Date

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Print Name

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Signature of Guardian (if under 18)

Date

## **REFUND AND LOST CHIP POLICY**

### **TRI-CALIFORNIA EVENTS, INC CANCELLATION/REFUND POLICY**

REFUND POLICY: THIS POLICY PROVIDES FOR A GRACE PERIOD IN WHICH YOU MAY RECEIVE A REFUND TO YOUR CREDIT CARD AT 50% OF YOUR RACE ENTRY FEE. AFTER 5/01/08 AND UP TO 5/31/08 YOU MAY FAX US A DOCTOR'S NOTE TO 310-473-3914 TO RECEIVE A 50% REFUND. IF YOU HAVE AN INJURY AFTER THE ABOVE DATES AND WOULD LIKE TO SUBMIT AN EXCEPTION TO OUR REFUND POLICY, YOU MAY SEND AN EMAIL TO THE RACE DIRECTOR AT LEAST 72 HOURS PRIOR TO THE RACE.

ENTRY FEES ARE NOT TRANSFERABLE TO ANOTHER PERSON (USAT CONSIDERS THIS FRAUD). IF YOU SELL OR GIVE YOUR RACE SLOT AWAY, BOTH YOU AND THE PERSON USING YOUR RACE SLOT ARE SUBJECT TO A TWO-YEAR SUSPENSION FROM RACING AT ANY USAT OR TRICALIFORNIA RACE. AN UNAUTHORIZED RACER JEOPARDIZES OUR LIABILITY INSURANCE AND CAN CHANGE THE PLACEMENT STATUS OF OTHER RACERS THAT HAVE WORKED HARD TO FINISH THE RACE.

A PHOTO IDENTIFICATION AND YOUR USAT ANNUAL MEMBERSHIP CARD (IF APPLICABLE) MUST BE SHOWN AT REGISTRATION PICK-UP.

I AGREE TO RETURN THE CHAMPIONCHIP TIMING CHIP RECEIVED DURING REGISTRATION/PACKET PICK UP TO THE TIMING TEAM AT THE END OF THE RACE, OR TO A MEMBER OF THE RACE PRODUCERS IF I DO NOT PARTICIPATE OR COMPLETE THE COURSE. IF THE CHIP IS NOT RETURNED WITH IN 30 DAYS I AGREE TO PAY THE REPLACEMENT FEE OF \$30. I AGREE TO PAY A \$10 LATE FEE IF THE TIMING CHIP IS RETURNED AFTER 30 DAYS.

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Signature

Date

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Print Name