

Saving Lives...One Mile at a Time!



NORTHWEST BANK

Commitment you can bank on.

2018 IRONMAN "Community" TRIATHLON

As a community, we will complete an
Ironman Triathlon!

APRIL 15TH - MAY 12TH, 2018

Invite your family & friends to sign-up with
you! Set your own goals and collect pledges
to benefit Clay County's Relay for Life.



How it Works:

1. Complete and return your registration (must be 18 or older) along with the \$25 entry fee to Northwest Bank (705 Grand Ave., Spencer) by Wednesday, April 4, 2018. T-Shirts can be picked up at Northwest Bank during regular business hours any time after April 15th.
2. Get out there & collect as many pledges as you can. Proceeds benefit Clay County's Relay for Life. (No minimum pledge collection required)
3. Complete the 4 Week Challenge any time during Sunday, April 15th through Saturday, May 12th. Set your own goals and keep track of your Ironman Triathlon miles completed and funds raised! Be sure to visit www.Bank-Northwest.com/Ironman and log your activity.

The Closing Ceremony will be held on May 12th from 10:00 am - 12:00 pm at Northwest Bank, 705 Grand Ave; come and go! Pledges will be collected at this time and we invite you to join us for ice cream to celebrate!



2.4 MILES



112 MILES



26.2 MILES

Swim, Bike, & Run all at the Spencer YMCA! Call or stop by & ask about the IronMan Challenge Discount!

VISIT WWW.BANK-NORTHWEST.COM/IRONMAN FOR MORE INFORMATION

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Sunday, April 15th - Saturday, May 12th 2018

Registration deadline is Wednesday, April 4, 2018



You must be 18 year of age or older to register.

Please complete, sign and return to your registration and entry fee to Northwest Bank at 705 Grand Avenue, Spencer, IA. For more information visit our website at www.Bank-Northwest.com/Ironman

NAME _____

ADDRESS _____

PHONE NUMBER _____

AGE _____

E-MAIL ADDRESS _____



ENTRY FEE: \$25.00

Please make checks payable to "Banking on a Cure."
Proceeds will benefit Clay County's Relay for Life.

T-SHIRT SIZE: ADULT

Please check one: S M L XL 2XL

By completing this registration form I authorize Northwest Bank to use my name and photo including but not limited to any print, web or social media advertisements for promotional materials regarding this event.

PLEASE SIGN _____

DATE _____

Event Waiver and Release of Liability: WARNING: READ CAREFULLY. THIS AGREEMENT INCLUDES A RELEASE OF LIABILITY AND WAIVER OF LEGAL RIGHTS AND DEPRIVES YOU OF THE RIGHT TO SUE NORTHWEST BANK AND OTHER PARTIES. DO NOT SIGN THIS AGREEMENT UNLESS YOU HAVE READ IT IN ITS ENTIRETY AND FULLY UNDERSTAND ITS TERMS AND CONSEQUENCES. SEEK THE ADVICE OF LEGAL COUNSEL IF YOU ARE UNSURE OF ITS EFFECT. I know that running and volunteering to work in the triathlon challenge are potentially hazardous activity which could cause injury or death. I should not enter and run in club activities unless I am medically able and properly trained, and by my signature, I certify that I am medically able to participate, am in good health and am properly trained. I agree to abide by any decision of a race official relative to any aspect of my participation in this event, including the right of any official to deny or suspend my participation for any reason whatsoever. I assume all risks, both known and unknown, associated with running and participating in this event, including but not limited to: falls, contact with other participants, the effects of the weather, including high heat and/or humidity, traffic and the conditions of the road all such risks being known to and appreciated by me. Having read this waiver and knowing these facts and in consideration of your acceptance of my application for participation I, for myself and anyone entitled to act on my behalf, waive and release Northwest Bank, its officers, administrators, employees and all event sponsors and volunteers from all claims or liabilities of any kind arising out of my participation in this event, even though that liability may arise out of negligence or carelessness on the part of the person or entity named in this waiver. I have read, understood, and accept the agreement above. Signature of parent or legal guardian if: registrant if over 18 years of age; or parent/legal guardian of minor, incapacitated, or mentally challenged person.

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Sunday, April 15th - Saturday, May 12th 2018

PLEDGE SHEET

PARTICIPANTS NAME _____

MY GOAL! (MARK & SET YOUR GOAL)

- MY GOAL IS TO COLLECT \$_____ AND I WILL SWIM WALK BIKE AND/OR RUN _____ MILES.
- MY GOAL IS TO SWIM WALK BIKE AND/OR RUN _____ MILE FOR EVERY \$_____ I COLLECT.

PLEDGERS NAME	AMOUNT	PLEDGERS NAME	AMOUNT
1 _____	\$ _____	11 _____	\$ _____
2 _____	\$ _____	12 _____	\$ _____
3 _____	\$ _____	13 _____	\$ _____
4 _____	\$ _____	14 _____	\$ _____
5 _____	\$ _____	15 _____	\$ _____
6 _____	\$ _____	16 _____	\$ _____
7 _____	\$ _____	17 _____	\$ _____
8 _____	\$ _____	18 _____	\$ _____
9 _____	\$ _____	19 _____	\$ _____
10 _____	\$ _____	20 _____	\$ _____

Tax Donations Receipts will be available upon request.
Checks can be made payable to Banking on a Cure. Thank you!