How should I train for this event?

Swimming

- Participate in water exercise classes.
- Tues/Thurs 8:30 am Boot Camp H_2O with Kathy is a great training option.
- Lap swim, water walk, use the kickboard.

Running/Walking

- Walk or run on the track, the perimeter a gymnasium, outdoors, at the mall.
- Walk or run on a treadmill.
- Cross train using an elliptical or cross trainer.

Cycling

- Attend indoor group cycling classes.
- Cycle on the upright or recumbent bikes in the fitness center.
- Cycle outdoors weather permitting.
- Cross train using an elliptical or cross trainer.

Other activities may be done to compliment your training such as strength training/weight lifting, core classes, cardio classes, yoga/pilates, and others. Consider hiring a Personal Fitness Trainer. Most importantly, HAVE FUN!

Check out the YMCA Group Fitness Schedule for information on classes and lap/family swim times.





FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

Join us for the Altru Family YMCA 5th Annual

WINTER INDOOR TRIATHLON



Saturday, March 4, 2017

First Wave: 9:00 a.m.

Altru Family YMCA • 215 N 7th St • Grand Forks, ND (701)-775-2586 • www.gfymca.org





Heat up your winter with an indoor adventure! Swim, bike and run/walk in the comfort of the indoors. You can seriously push yourself or take it at a slower pace, or somewhere in-between. This event is also a great first-time triathlon.

How does it work?

The race is conducted in waves of 5 people. You will be with the same wave (group) during all three events. Waves start every 25 minutes.

First you will swim or walk laps in the pool for 15 minutes while a Y volunteer on-deck counts your laps. If you are not a strong swimmer that's ok – you can use any stroke, kick with a kickboard, or water walk. Aqua belts are also available to use while training and during the event.

Next, you'll go to the locker room and change (you'll have about 15 minutes) and head down to the group cycling room. You'll ride as a group for 20 minutes, pedaling at the pace you feel comfortable with. Your mileage will be tracked on the bike's computer and will be recorded.

Finally, you will head to the track or treadmill and complete a 20 minute walk or run. Your laps will be counted by Y volunteers on the track. A volunteer will also be stationed in the Fitness Center to help with treadmill runners/walkers.

Top finishers are decided by a percentage conversion of the total number of laps and miles per competitor.

Registration Details

- Ages: 15 and up
- Registrations will be accepted until 4:00 pm on **Friday, March 3.**
- Same day registrations are possible if spots are available.
- Packets may be picked up at the Y customer service desk on Wednesday, Thursday or Friday before race day.
- Early registrants may choose the wave/time preferred. We cannot guarantee any spots but we'll try to accommodate you the best we can.
- Youth under age 15 may be eligible to participate if they are accompanied by a parent, tall enough to ride the Keiser bikes, and able to complete all three events. Please call Patti McEnroe at 701-775-2586.
- After you register, a YMCA representative will call you with instructions, confirm your starting time, and answer any questions you may have.



Prizes will be awarded to top finishers in men's and women's categories. Each participant will receive a T-shirt and a sponsor gift pack. Door prizes will be awarded throughout the event.

REGISTRATION						Please Print
FIRST & LAST NAME						
□ MALE □ FEMA	ALE					
ADDRESS						
CITY, STATE, ZIP						
PHONE						
EMAIL						
T-SHIRT SIZE (CIRCLE ONE):						
EMERGENCY CONTACT						
EMERGENCY CONTACT PHON	NE					
☐ YMCA/CHOICE MEMBER \$4 ☐ NON-MEMBER \$50						
WAVE PREFERENCE (CIRCLE	ONE)	(Not g	uaran	teed):		
9:00 am 9:25 am 9:55	am	10:2	0 am	10:	45 am	11:10 am
Additional early afternoon w	aves v	vill be	sched	uled as	-neede	d.
WALK/RUN PREFERENCE (CI	RCI F (ONE):	Tra	ck	Treadr	nill

I am entering this event at my own risk and assume all responsibility for injuries I may incur as a direct or indirect result of my participation. I hereby, for myself, my heirs, executors and administrators, waive the release of any and all rights and claims for damages or injuries I may have against the Altru Family YMCA and its affiliates, their agents, representatives, directors, successors, and assignees. I certify that I am aware of the physical stress involved in participation of this event and the consequent risk to my health and that I have made adequate preparations to compete. I also give permission for the free use of my name and/or picture in a photograph, broadcast or other account of this event.

Participant Signature	
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DATE PAYMENT RECEIVED BY									
□CHECK	□CASH		□ CREDIT (CARD					
AMOUNT (CIRCL	E ONE):	\$40	\$45	\$50	\$55				