



**DIVA'S ONLY TRIATHLON  
REGISTRATION FORM**



**NAME(s):** \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First (Fill out all three names if relay)

**AGE(s):** ( AS OF DEC 31 ) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

ARE YOU AN ATHLETE WITH A DISABILITY? Y\_\_ N\_\_  
(please contact Miranda to discuss race day protocol 604-317-0864 or email miranda@reflexionclinics.com)

**Contact Email Address:** \_\_\_\_\_  
(will be kept confidential, only used to contact of time changes etc. please print clearly)

**Phone #:** \_\_\_\_\_ **Occupation:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Race Fee's:**

**Divas**

Super Early Bird :	\$55.00 Until May 01	Relay Fee \$115
Early Bird :	\$65.00 Until June 01	Relay Fee \$125
Med Bird :	\$75.00 Until July 20	Relay Fee \$135
Late Bird:	\$80.00 Until July 29	Relay Fee \$140
Tribc discount:	- \$10.00	

**Tribc#** \_\_\_\_\_

**Divettes**

Super Early Bird:	\$20.00— Until May 01	\$80.00
Early Bird :	\$25.00—Until June 01	\$85.00
Med Bird :	\$35.00—Until July 20	\$95.00
Late Bird :	\$40.00—Until July 29	\$100.00
Tribc discount:	- \$1.00	

**Total \$ Submitted:** \_\_\_\_\_

**Method of payment:**

**Visa or M/C:** \_\_\_\_ / \_\_\_\_ / \_\_\_\_ / \_\_\_\_ exp: \_\_\_\_ / \_\_\_\_  
yy/mm

**Cheque:** Made payable to re:fluxion  
(note all nsf cheques will be charged a \$10 nsf fee)

**All registration forms to be mailed to:**

**re:fluxion**  
**307-5629 Dunbar Street, Vancouver, BC , V6N 1W5**  
**Fax: 604-734-1366**

NOTE:  
ALL RACE FEE'S ARE NON-REFUNDABLE AND NON TRANSFERABLE