



40th Crescent City Triathlon

July 26, 2026 Sunday, 8:00 a.m.

Mail-in Registration Form

Or at www.crescentcitytriathlon.com
and <https://trisignup.com/Race/Register/?raceId=192021>

official use only

Category	Early Fee	After July 5	Total
● Adult Triathlon, Individual, ages 13 & up	\$65	\$75	\$
● Adult Duathlon, Individual	\$50	\$60	\$
● Adult Tri, Relay Team of 2 or 3 people including Business Challenge Teams	\$45 per person	\$50 per person	\$
● Kids Triathlon, Individual	\$25	\$30	\$
● Donation Drawing Tickets	\$1.00 each or	6 for \$5.00	# & \$

Total \$ _____
 Mail & Payable to:
 Crescent City Triathlon
 P.O. Box 404
 Crescent City, CA 95531

Participant's Name, please print _____

Athletes & guardians are required to sign **Waiver** on race day

Address _____

City, St, Zip _____

Phone _____ Gender M_ F_

Email _____

Date of Birth _____ Age on race day ____

How many times have you done the CC Tri? _____

Race day **emergency** contact:

Name _____

Phone _____

Volunteers needed

Name _____

Contact info _____

TRIATHLON ADULT RELAY: Team Name: _____

BUSINESS TRIATHLON TEAM RELAY CHALLENGE: Business Name _____

Winner awards to the top male, top female, top mixed team, and Business challenge, no age category awards.

Each athlete must submit a separate entry form; captain registers first with team name; each athlete must sign Waiver on race day. No team member changes allowed race day.

Swimmer's Name _____ Male _____ Female _____

Cyclist's Name _____ Male _____ Female _____

Runner's Name _____ Male _____ Female _____