New Elite License Applicant Form

ATHLETE NAME EMAIL ADDRESS

Please submit the following materials if you are applying for an elite license for the first time, or if your elite license has been inactive for over three (3) years. Incomplete applications will not be approved. Please use the checklist below to ensure you have included the required documents with your new application.

- ☐ **This form - New Elite License Applicant Form, 1 page.**
- ☐ **2014 Elite License Application, 2 pages with signatures at the bottom of both pages.**
- ☐ **Payment (Check or Credit Card information)**
- ☐ **Race results to confirm below information; please include just the page with your race result highlighted.**

PLEASE MAIL ALL APPLICATIONS TO:

USA Triathlon
ATTN: Elite Membership
5825 Delmonico Drive, Suite 200
Colorado Springs, CO 80919

I AM APPLYING FOR THE FOLLOWING LICENSE (PLEASE CIRCLE ONE & MARK CRITERIA):

Elite Triathlete License/$45 (this license covers an athlete as an elite at all events)

- I meet criteria ____ and have attached the appropriate results to confirm this.

Collegiate Elite License Designation/$45 (this license covers an athlete as an elite at all events)

- I meet criteria ____ and have attached the appropriate results to confirm this.

Draft Legal Pathway/$45 (this license covers an athlete as an elite at all events)

- I meet criteria ____ and have attached the appropriate results to confirm this.

Elite Duathlete License/$45 (this license covers an athlete as an elite in duathlon but as an amateur in triathlon)

- I meet criteria ____ and have attached the appropriate results to confirm this.

Elite Off Road License/$45 (this license covers an athlete as an elite at all off road events but as an amateur at on road events)

- I meet criteria ____ and have attached the appropriate results to confirm this.

Elite Foreign License/$45 (this license covers all non- US elites)

- I have attached a copy of my National Federation license or a letter from my National Federation confirming my elite status.

Name and Date of Event Results: _____

Name and Date of Event Results: _____

I hereby confirm that all the information indicated above is accurate and true:

_____

PRINT NAME SIGNATURE DATE