



**2020 USA PENTATHLON MULTISPORT  
JUNIOR AND YOUTH  
NATIONAL CHAMPIONSHIPS AND PARA LASER-RUN  
Roswell, New Mexico  
January 8 and 9, 2021.**

We are pleased to invite you to the 2020 USA Pentathlon Multisport National Championships in Juniors and Youths Divisions and Para Laser-Run event in Roswell, New Mexico

<b>YOUTH A</b> (Under 19) Fencing Swim: 200 Meters Combined 4x800m	<b>YOUTH B</b> (Under 17) Fencing Swim: 200 Meters Combined 3x800m	<b>YOUTH C</b> (Under 15) Fencing Swim: 100 Meters Combined 2x800m	<b>YOUTH D</b> (Under 13) Fencing Swim: 100 Meters Combined 2x400m	<b>YOUTH E</b> (Under 11) Fencing Swim: 50 Meters Combined 1x400m	<b>JUNIOR</b> Riding Fencing Swim: 200 Meters Combined 4x800m
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**RULES AND VENUES:**

The competition will be carried out according to the UIPM rules.

<b>FENCING</b>	(RRAC - Roswell Recreation & Aquatic Center)	6 pistes
<b>SWIMMING</b>	(RRAC - Roswell Recreation & Aquatic Center)	25yards, indoor pool/8 lanes
<b>LASER RUN</b>	(Cielo Grande Recreation Area)	800/400 m loop/grass/laser
<b>HORSE RIDING</b>	(Casa Querencia – 1607 Fowler Rd)	Course depends on the number of riders

**ACCOMMODATIONS and TRANSPORTATION**

**Competition Hotel:**

**La Quinta Inn & Suites by Wyndham**

200 E 19 St. Phone: (575) 622 8000

To get discount mention “**Pentathlon National**”

- LOC guarantee transportation from the airport

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**ENTRY FEE:**

- \$ 120 - Championships (Junior)
- \$ 70 - Championships (A,B,C)
- \$ 40 - Championships (D, E)
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Make check payable to: **Caprock Swim Team**



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**COVID – 19 INFORMATION**

*Taking care of safety, the competition will be conducted in accordance with all sanitary recommendations and in accordance with applicable regulations in a safe distance between participants.*

**SCHEDULE:**

FRIDAY	January 8	15:00	RIDING	Boys/Girls	<b>Casa Querencia</b>
SATURDAY	January 9	7:30	FENCE - boys	Warm up	RRAC
		8:00	FENCE - boys	START	RRAC
		8:30	SWIM - girls	Warm up	RRAC
		8:50	SWIM - girls	START	RRAC
		9:30	FENCE - girls	Warm up	RRAC
		10:00	FENCE - girls	START	RRAC
		10:30	SWIM - boys	Warm up	RRAC
		10:50	SWIM - boys	START	RRAC
		12:30	COMBINED	Warm - up	<b>Cielo Grande</b>
		12:50	COMBINED	START	Recreation Area
			Boys/Girls start right after boys' finish		
		14:30	PARA LASER-RUN		

**AWARDS:**

Top three athletes in each division for Boys and Girls

**OFFICIAL CONTACT;**

**Address: Roswell Pentathlon  
Cc: Jan Olesinski  
900 Mason DR, Roswell, NM 88201**

**Email: olesinski@nmmi.edu  
Phone: (575)937-619**



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**Entry form and payment must be postmarked no later than January 1, 2021**

Date of application \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Sex: M F

Birthdates \_\_\_/\_\_\_/\_\_\_ Age \_\_\_\_\_ Passport/Visa # (international competitors): \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_

Parents' Names \_\_\_\_\_

Business /Day phone: \_\_\_\_\_ Cell \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Division (for competition) JUNIOR A B C D E (circle)

**FENCING:** (Do you own all required fencing gear?) \_\_\_ YES \_\_\_ NO  
If no, please list gear you will need to rent upon arrival: \_\_\_\_\_

**SHOOTING:** (Do you own a pistol?) \_\_\_ YES \_\_\_ NO Please let us know if you need a pistol.

**PROJECTED SWIMMING TIME** (According to age group): 50 M: \_\_\_\_\_ 100 M: \_\_\_\_\_ 200 M: \_\_\_\_\_

**Medical Insurance Information (attach the copy of your insurance card)**

Insurance Company: ..... Address: .....  
Policy # .....  
.....

**TRAVEL INFORMATION:**

PLEASE INDICATE WHETHER YOU PLAN TO DRIVE OR FLY: DRIVING \_\_\_ FLYING \_\_\_

DATE OF ARRIVAL AT ROSWELL: \_\_\_/\_\_\_/\_\_\_ DATE OF DEPARTURE FROM ROSWELL \_\_\_/\_\_\_/\_\_\_

**FLIGHT INFORMATION (IF APPLICABLE):**

ARRIVAL DATE: \_\_\_/\_\_\_/\_\_\_ (M/D/Y) ARRIVAL TIME: \_\_\_\_\_ FLIGHT #: \_\_\_\_\_ AIRLINE: \_\_\_\_\_

DEPART. DATE: \_\_\_/\_\_\_/\_\_\_ (M/D/Y) DEPART. TIME: \_\_\_\_\_ FLIGHT #: \_\_\_\_\_ AIRLINE: \_\_\_\_\_

AIRPORT SHUTTLE SERVICE NEEDED? \_\_\_ YES \_\_\_ NO

.....  
Athlete/Parent

.....  
Athlete signature <or> Parent or legal guardian signature if athlete is under the age of 18



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***Parents of Minors must sign above and below*  
MEDICAL AUTORIZATION**

I, ..... the parent or legal guardian of .....(minor's name) hereby execute the foregoing Waiver and release for and on behalf of the minor named herein. I hereby authorize any licensed physician, hospital or other medical/health care facility to treat the minor named herein for the purpose of attempting to treat or relieve any injuries received by said minor arising out of or relating to his /her participation in the USMP Pentathlon event.

.....  
Athlete/Parent    Signature

Acknowledgment

State of .....

County of.....)

This .... day of .....20 ....by.....

My commission Expires: .....