

TRACK & FIELD REGISTRATION FORM



R. C. STRIDER'S

COMPLETE THE FOLLOWING INFORMATION (PLEASE PRINT)

FIRST NAME	LAST NAME	BIRTH DATE	AGE
HOME ADDRESS	CITY/STATE	ZIP CODE	
HOME PHONE	CELL PHONE	EMERGENCY PHONE	E-MAIL

UNIFORM SIZE:

Fees Paid _____
 Check # _____
 Cash _____

Participation Agreement

I understand that this registration with R. C. Strider's of my son/daughter guarantees membership with AAU (amateur athletic union) of USA. I also understand that should my son/daughter decide not to participate or be released from the team, there will be NO refunds given (special circumstances at discretion of Board).

I understand and acknowledge that my child participates at his/her own risk and I hereby waive for myself, my spouse and any legal guardian of my son/daughter liability of any kind or nature whatsoever and all claims against R. C. Strider's, coaches, volunteers, affiliates and their respective heirs, successors and assigns (collectively, "the Releasees") for personal injury, death or property damage resulting from my child's participation in track and field and related events. I understand the risk of injury and I knowingly and freely assume all such risk on behalf of my child and assume full responsibility for my child's participation without recourse against the Releasees'.

I acknowledge that my son's/daughter's image maybe recorded (by video, photograph or otherwise) during any event in which he/she participates. I agree to the use of my child's name and image in video/television/radio broadcast, newspapers, brochures, promotional material and other media without compensation. I further acknowledge that I have the legal authority, custody and control of my child and warrant that I have the legal right to make these acknowledgements and agreements on behalf of my child.

Parent/Legal Guardian Signature

Date

Office use only	Date Registered:	Receipt No:	Amt. Paid:
	Date Entered :	Team Assigned:	Refund: