



**TRACK AND FIELD / ROAD RUNNING CROSS COUNTRY**

**2009 Junior High Provincial Championships**

Please fax forms to (204) 925-5792 or email form to office@athleticsmanitoba.com

Name: \_\_\_\_\_  
First Name Last Name

Gender: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
Day Month Year

Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

School: \_\_\_\_\_ Coach: \_\_\_\_\_

Parent/Guardian Name(s) \_\_\_\_\_

Email: \_\_\_\_\_

Each athlete is allowed to qualify and compete in up to three events.

Event 1: \_\_\_\_\_

Event 2: \_\_\_\_\_

Event 3: \_\_\_\_\_

**2009 Consent Form**

**Please Note:**

If an athlete is not an Athletics Manitoba school or individual member, they must pay \$1.00 per event.

Athlete's Name: \_\_\_\_\_

Parent(s)/Guardian(s) Name(s) : \_\_\_\_\_

The above named participant and the participant's parent/guardian have requested registration in the 2009 Athletics Manitoba Junior High Provincial Championships. In consideration of such registration, the right of the participant to compete in this event and the use by the participant of the sponsoring agency's facilities and equipment, both the participant and the parent/guardian each acknowledge that the participant will be competing in the Athletics Manitoba Junior High Provincial Championships and sponsoring agency's facilities at the participant's sole risk and the participant, on his or her own behalf and on the behalf for his or her heir, executors, administrators and assigns hereby release, discharge and agree to hold harmless, Athletics Manitoba, the MTFOA and all those associated with these organizations. We also agree to allow Athletics Manitoba to use and reproduce the participant's name and/or likeness and/or information concerning the participant and to circulate the same for any and all purposes in any manner.

Signature of Parent/Guardian

Date