Tiki Vault

Landon Athletics Entry Form



Name (please print)	Phone
Street Address	
City, State, Zip	
Email	
AgeGende	er
Best Height in Competition	
defend and hold harmless Jerry A. Sess host organizations and the facility, ver any other organizers, promoters, spon	eby release, waive and covenant not to sue, and further agree to indemnify, sions, Arla G. Sessions, Landon Athletics L.L.C., Ethan L.L.C., event directors, nue and property owners or operators upon this Halloween Vault Event; and issors, advertisers, coaches and officials for this event. I also hereby grant any photography and videotape of myself and/or child related to the Vault ational video materials.
Competitor's Signature	Date
Parent's Signature	Date
Sanctioned by the USATF	
Event Fee: \$25.00	
Make all checks payable to: Landon PO Box	

Nashville, MI 49073