

Indoor Championship Vault

Landon Athletics Entry Form



Name (please print)

Phone

Street Address

City, State, Zip

Email _____ Age _____

Club Affiliation _____ Gender _____

If not affiliated with a club, please write unattached

Best Height in Competition _____ Possible Starting Height _____

Wavier and Release of Liability: I hereby release, waive and covenant not to sue, and further agree to indemnify, defend and hold harmless Jerry A. Sessions, Arla G. Sessions, Landon Athletics L.L.C., Ethan L.L.C., event directors, host organizations and the facility, venue and property owners or operators upon this Halloween Vault Event; and any other organizers, promoters, sponsors, advertisers, coaches and officials for this event. I also hereby grant permission to Landon Athletics to use any photography and videotape of myself and/or child related to the Vault Barn activities for advertising or educational video materials.

Competitor's Signature

Date

Parent's Signature

Date



Sanctioned by the USATF

Cost: Please check website page

Make all checks payable to: Landon Athletics, L.L.C.

PO Box 538

Nashville, MI 49073