



# Landon Athletics Club Registration Forms

## Information:

- Please read and fill out all attached forms
- If you wish to compete as a Landon Athletics Athlete, then you will need to fill out the **Team Landon Athletics Registration Form**

## Pricing and Payment:

- **Payment**
  - Payment is due by the first practice of every month, if month route is chosen
- **Pricing**
  - One practice: **\$15**
  - Monthly: **\$150**
  - Yearly: **\$1500**
- **Check or Cash**
  - Monthly payments due at the first practice of every month
  - Yearly is once a year at the first of that month (October 2020 – October 2021)
  - Check can be out to **Landon Athletics**



# USA TRACK AND FIELD MEMBERSHIP

**Existing Member:**  
**Membership Number** \_\_\_\_\_ **Club Affiliation** \_\_\_\_\_

**Membership Fee:**

**Youth Membership**   
*18 years and younger*  
\$27.86 Per Calendar Year

or

**Adult members**   
*19 years and older*  
\$44.40 Per Calendar Year

**Name:** \_\_\_\_\_ **Ethnicity:** \_\_\_\_\_  
(first and last)

**Date of Birth:** \_\_\_\_\_ **Sex:** \_\_\_\_\_ **Female** \_\_\_\_\_ **Male** \_\_\_\_\_  
(month, day, year)

**Primary Contact Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Emergency Contact Name:** \_\_\_\_\_

**Emergency Contact Phone:** \_\_\_\_\_

**Emergency Contact Email:** \_\_\_\_\_

**Emergency Contact Relation:** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**USA Citizen:** \_\_\_\_\_ **Yes** \_\_\_\_\_ **No** \_\_\_\_\_  
*If no what citizenship*

**Year of Graduation** \_\_\_\_\_ **Military** \_\_\_\_\_ **Disability** \_\_\_\_\_  
*High school or College* *Yes or No* *Yes or No, if yes what disability*

**USA Email Communications:**

*Would you like to receive any of the following*

- Official news, information and promotions from USATF and its Partners  
Yes No
- Offers, discounts and promotions for Team USATF Store  
Yes No
- Association communications  
Yes No

USATF Waiver and release of Liability, Assumption of Risk and Indemnity Agreement on behalf of this athlete.  
Please select yes and read agreements on [landonathletics.com](http://landonathletics.com) \_\_\_\_\_ **Yes**

**Athlete Wavier**

In consideration of being allowed to participate in any way in the Landon Athletics Pole Vault Club and competition, the undersigned:

1. Acknowledge and fully understand that each participant will be engaging in activities that involved risk of injury which might result not only from their own actions, inactions or negligence, but actions, inactions or negligence of others, the rules of play or the condition of the premises or of any equipment used. Further, that there may be other risks not known or not reasonably foreseeable at this time.
2. Assume all the foregoing risks and accept personal responsibility for damages following such injury, permanent disability or death.
3. Release waive and covenant not to sue Landon Athletics, their respective administrators, directors, coaches and other employees of the organization, other participants, all of which are hereinafter referred to as "releasee" from any and all liability to each of the undersigned, his or her heirs and next of kin for any claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the releasee or otherwise.

**Medical Wavier**

Secondary Emergency Contact Name: \_\_\_\_\_

Secondary Emergency Contact Phone Number: \_\_\_\_\_

Any facts concerning the athlete's medical history, including allergies, medications being taken, and physical impairments. \_\_\_\_\_

**Photograph Wavier**

I give permission for myself, son, and/or daughter to be photographed/Videoed and used in the promotion of [www.landonathletics.com](http://www.landonathletics.com) web site. I hereby transfer to Landon Athletics pole vault club all copyrights and other interests in the photographs. I also hereby grant royalty-free permission to use these photographs/videos and understand that this material may be used in various publications.

I, the undersigner, have read the above wavier and release, understand that I have given up substantial rights by signing, and sign it voluntarily.

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

*Please print*

Athlete's Signature: \_\_\_\_\_

I, the parent of the undersigned, have also read the above wavier and realize, and understand that my athlete has give up substantial rights by signing

Parent's Name: \_\_\_\_\_

*Please print*

Parent's Signature: \_\_\_\_\_

*Only required if athlete is under the age of 18*