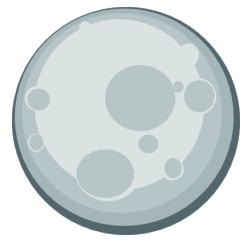


# Landon Athletics



## Moon Vault Entry Form

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Name (please print) \_\_\_\_\_ Phone \_\_\_\_\_

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Address \_\_\_\_\_

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City, State, Zip \_\_\_\_\_

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Email \_\_\_\_\_ Age \_\_\_\_\_

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Club Affiliation: \_\_\_\_\_ Gender \_\_\_\_\_

*If not affiliated with a club write unattached*

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Best Height in Competition \_\_\_\_\_

Vaulter's Accomplishments (meets won, all state, conference champ, records held, etc.)

Use back of entry form.

T-shirt size (circle one)                    S                    M                    L                    XL                    XXL

### Medical Release

I hereby grant my child permission to compete in the Moon Vault competition. I verify that my child has had a physical exam in the past year and is capable to participate in the activities related to the competition. I agree to indemnify, hold harmless and defend Jerry A. Sessions, Maple Valley High School and/or their employees from any liability for injury to my child, as well as any injury caused by my child. I also hereby grant permission to Landon Athletics to use any photography and videotape of myself and/or child related to Moon Vault activities for advertising or educational video materials.

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Competitor's Signature \_\_\_\_\_ Date \_\_\_\_\_

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Parent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Sanctioned by the USATF

Entry Fee: \$50

Make all checks payable to:

Landon Athletics, LLC  
PO Box 538  
450 E Casgrove St  
Nashville, MI 49073