

GREYHOUNDS TRACK AND FIELD CLUB REGISTRATION FORM

ATHLETE'S NAME

Surname

Given Name

Middle Initial

APPLICATION DATE (M/D/Y):**BIRTHDATE (M/D/Y)****SEX:** () Male () Female() **NEW MEMBER**() **RENEWING MEMBER****BC Athletics Membership #****MEMBERSHIP TYPE (ATHLETE):** () MASTER () SUPPORTING () OTHER
(NON ATHLETE): () ASSOCIATE () COACH () OFFICIAL**MAILING ADDRESS**

Street Address

City

Province

Postal Code

HOME PHONE**CELLULAR****BUSINESS PHONE****E-MAIL ADDRESS** (For communication of Club information)**COACH****COUNTRY OF BIRTH****CITIZENSHIP,****ATHLETE'S CARE CARD NUMBER****MEDICAL ALERTS** (include allergies, conditions and regular medications)**EMERGENCY CONTACT**

Name

Phone Number

PHYSICIAN

Name

Phone Number

THIS IS A VOLUNTEER BASED, NON PROFIT ORGANIZATION. PLEASE INDICATE AREAS IN WHICH YOU WOULD BE WILLING TO HELP. () BOARD OF DIRECTORS () FUNDRAISING () COACHING

\$ 50.00

\$

\$

\$

CLUB FEE (For Year 2011 Jan-Dec)**BC ATHLETICS FEE****DONATION (optional)****TOTAL****MAKE CHEQUE(S) PAYABLE TO: GREYHOUNDS TRACK & FIELD CLUB****MAIL TO:** 16580 GLENWOOD CRES SOUTH,
SURREY, BC, V4N 1W7**BC AMATEUR ATHLETICS ASSOCIATION SPORT SAFETY/ACKNOWLEDGEMENT OF RISK**

The responsibility for sport safety must be shared by all. I, the undersigned, am aware that there is a certain risk of injury involved in my participation in sport, either while traveling to or from the event; or while attending or participating in the programs or activities of the events which are sanctioned/approved by BC Athletics, its Divisions, its Member Clubs or recognized societies. It is understood by me that the signing of this document is intended to indicate that I assume the shared responsibility and acknowledge the risk of injury by so participating.

BC ATHLETICS PRIVACY POLICY

By completing this membership form, signing and joining BC Athletics you consent to the collection of information and its use as per the BC Athletics Privacy Statement and Policy – see Identifying Purposes – Appendix II of the Policy available at ww.bcathletics.org. For more information or to limit the release of information please contact the BC Athletics Privacy Officer, Sam Collier at sam.collier@bcathletics.org.

RELEASE OF INDEMNITY

IN CONSIDERATION for the acceptance of this application, the undersigned, on behalf of myself, my child, heirs, executors and administrators, hereby: a) release Greyhounds Track and Field Club and B.C. Athletics, their directors and officers from all liability, costs, damages and expenses whatsoever caused as a result of participation by me in events or practices including any loss, injury or damage that may occur while travelling to, staying at or participating in any program or activity while being a Member of the Greyhounds Track and Field Club, and the undersigned hereby indemnifies the Greyhounds Track and Field Club and B.C. Athletics their directors and officers from and against all liability, costs, damages and expenses whatsoever in connection with any claim made with respect to the foregoing and b) authorize the Greyhounds Track and Field Club to reproduce and report upon, any image, likeness or statistic involving my performance in athletic events.

SIGN: **X****APPLICANT/ATHLETE****X****CLUB REGISTRAR**