

## Largo Elite Track Club Registration Form

**Athlete Information**

Child Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_ Sex  M  F  
First, Last

Uniform Size Youth:  S  M  L  XL Adult:  S  M  L  XL  XXL

Address \_\_\_\_\_  
Street Apt# City State Zip Code

Telephone (Home) \_\_\_\_\_ How did you hear about us: \_\_\_\_\_

Mother/Guardian \_\_\_\_\_  
Last Name First Name

Address \_\_\_\_\_  
Street Apt# City State Zip Code

Home \_\_\_\_\_ Cell # \_\_\_\_\_ e-mail \_\_\_\_\_

Father/Guardian \_\_\_\_\_  
Last Name First Name

Address \_\_\_\_\_  
Street Apt# City State Zip Code

(Home) \_\_\_\_\_ (Cell #) \_\_\_\_\_ (e-mail) \_\_\_\_\_

**Health Information**

Insurance Carrier \_\_\_\_\_ Insurance ID \_\_\_\_\_

Allergies/Medical Condition \_\_\_\_\_

Emergency Contact Information 1

Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Cell or Daytime Phone # \_\_\_\_\_

Emergency Contact Information 2

Name \_\_\_\_\_

Relationship to child \_\_\_\_\_

Cell or Daytime Phone # \_\_\_\_\_

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING IN ANY/ALL ACTIVITIES ASSOCIATED WITH Largo Elite Track Club, Inc. including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault, or actions of any kind which may hereafter occur to me including my traveling to and from this activity. Further, this shall authorize any doctor to commence immediate treatment in the event of any accident, illness, or injury to the athlete, and the undersigned shall be liable for payment thereof, without necessity of further release or authorization whatsoever. The undersigned also acknowledges and agrees that pictures and/or videos may be taken of the named athlete and used to promote the track club in current year and future. I further agree that I will abide by Largo Elite Track Club, Inc. "Code of Conduct", and I do agree to its terms and conditions.

\_\_\_\_\_  
 Participant's Signature  
 (Please print legibly.)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Parent/Guardian Signature  
 (If under 18 years old, Parent or Guardian must also sign.)

\_\_\_\_\_  
 Date