Motley Crew Vault Club Year 2024

MEMBERSHIP & WAIVER FORM

Name:	Sex	Birthday:/	/		
Graduation Year					
Address:					
City			Zip		
Home Phone:	me Phone:Cell Phone:				
E-mail					
T-Shirt Size (circle one) S M L XL XXL			sonal Record:		
Emergency Contact:					
Medical : List any condition that may inhibit performeets	•	•	attention or monitorir	ng during practices or	
Be assured that this club is concerned for the heataken through proper warm-ups, stretching and tr		well being of its	members. Precautio	ns to avoid injury are	
Track & Field is not an exception to this risk. I under voluntarily agree to participate in the activity and know (including death), both foreseen and unforeseen, of metassigns do hereby release, waive, discharge and cover Organizing Committee, the Facility Sponsors, their "Releasees") from all liability, loss, claims, demands, post any other expenses arising from any claim or lawsuit property resulting from or arising in connection with, or event that I am injured, I hereby consent to the provision By signing this agreement, I grant USA Track & Field, I voice, video, athletic performance, biographical and of these without charge, restriction or liability, but only thowever, will such usage constitute an endorsement of Club Member Signature	wingly assume any attendance at easees (as define enant not to sue respective offic ossible causes of it that may arise related to, my attended to the control of the control of the control of the control of the purposes	ny and all risks of and participation in ad below). I, for m USA Track & Field ers, directors, em action, court costs, from any loss, daitendance at or participal appropriate eme rew Vault Club a lim any format whats of advertising or participal actions.	oss, damage to my per the Motley Crew Vaulyself, my heirs, persor, Inc., the local USATF oloyees, agents and esettlement costs and formage or injury (including cipation in the Motley Corgency medical treatmented license to use my oever, and to distribute foromoting the sport of pecific written consent.	rson or property, injury to Club, from any cause hal representatives and Association, the Local volunteers (collectively ees, attorney's fees and high death) to me or my Crew Vault Club. In the nt. name, likeness, image, e, broadcast and exhibit	
In the event of injury and medical treatment is decan be transported to the nearest medical treatment Do you have a preferred medical treatment facility	ent facility? □Y	y, if a parent/gua es.	Date		
	Club Chec	klist:			
Annual Individual Club Membership \$50 (Each Additional Family Member \$20)					
Optional USATF membership \$30 (online http://www.usatf.org using Club# 22-0032)*					
*Athletes wishing to compete in USATF (Championship e	vents will need a	USATF Membership		