

MISSISSAUGA TFC – COMPETITIVE ATHLETE REGISTRATION 2017

Athlete Name: _____ M F
Last Name First Name

Address: _____
Number Street

City Postal Code

Telephone: _____ Cell: _____

E-mail: _____ Birth date: _____/_____/_____
Year Month Day

MEMBERSHIP TYPE (Please check one):

<input type="checkbox"/> AO FULL MEMBERSHIP* (Including Cross-Country: Jan–Dec) \$ 625.00	<input type="checkbox"/> AO INDOOR ONLY (Jan–Apr) \$ 300.00
<input type="checkbox"/> AO FULL MEMBERSHIP* (Excluding Cross-Country: Jan–Dec) \$ 550.00	<input type="checkbox"/> AO X-COUNTRY ONLY (Sep–Dec) \$ 150.00
<input type="checkbox"/> AO OUTDOOR & CROSS-COUNTRY (May–Dec) \$ 375.00	
<input type="checkbox"/> AO OUTDOOR ONLY (Incl. University athletes: May–Aug) \$ 300.00	<input type="checkbox"/> MTA FULL MEMBERSHIP* (Jan–Dec) \$ 500.00

*Full memberships may be paid in one installment OR two equal installments dated December 10, 2016 and January 31, 2017. Any exceptions to the above payment plans must be approved by MTFC manager.

MEMBERSHIP INCLUDES: Training • Athletics Ontario OR Minor Track Association registration fee • Meet entry fees • Club singlet (full memberships only) • Scholarship recommendations

MEETS: Athletes must compete as entered. Athletes must compete in a club uniform unless competing for a Royal Canadian Legion, provincial, or national team. Injuries or illness must be reported to club coach or manager prior to meets; failure to do so may result in removal from subsequent competition.

BINGO: To receive the benefit of paid meet entries and any other subsidies, one parent/guardian from each athlete’s family must serve on a Bingo Team. Teams and schedules are communicated to athletes and their families through e-mail and/or via the club web site. Parents / Guardians are to sign up for specific Bingo dates at the time of registration as per the following expectations (2017 dates listed on back of the Bingo Agreement & Contact Sheet) –

- Full-Year Memberships – four (4) dates
- Two Seasons – Three (3) dates
- One Season – Two (2) Dates

NOTICE: Each athlete is responsible for his/her own insurance and hospital coverage.

WAIVER: In consideration of accepting membership in the Mississauga Track and Field Club, I hereby for myself, my heirs, my executors and administrators, waive and release all claims and damages I may have against Mississauga Track and Field, its agents, successors, representatives and assignees for any and all injuries and accidents suffered by me which may arise out of my travelling to, participating in, or returning from any training practice, athletic meet, fund raising event, party or meeting associated with the Club.

DRUGS: The Mississauga Track and Field Club supports the IOC ban on performance enhancing substances, and on all substances deemed illegal in Canada. I agree that my membership in the Mississauga Track and Field Club will become null and void upon my conviction for use and/or sale of the aforementioned substances.

Signature of Athlete: _____ Date: _____

Signature of Parent/Guardian: _____ Date: _____
(If athlete is under 18 years of age)

Name of Parent/Guardian: _____
(Please print legibly)