

Olney Cross Country Club



Participant's information (PLEASE PRINT LEGIBLY AND CLEARLY)

<u>Child's Last Name</u>	<u>Child's First Name</u>	<u>Gender</u>	<u>Date of Birth</u>

Name of the Parent: _____

Email address: _____

Phone number: _____

Name of the Parent: _____

Email address: _____

Phone number: _____

By signing below, I allow my child(ren) to run and compete with the Olney Cross Country Club. I understand that there is the possibility of potential injury. I do not and will not hold the Olney Cross Country Club, along with their coaches or volunteers, liable or responsible for any injury that might occur during practices and races at the meets. I attest that my child(ren) has/have been found fit to participate in vigorous sporting activities. I also grant permission for emergency first aid treatment in the event I cannot be contacted. I give my permission for photos of my child(ren) to be posted on the Olney CCC website.

Parent's Name (PRINT)

Signature

Date