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**Medicine Hat Panthers Track & Field Club**

**INDOOR Season 2017/2018 Registration**

Given Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ AHC#:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctors Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Doctors Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Issues/Allergies/Injuries: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell(s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*please note that all cancellations or changes will be made through TEXT from head coach Sonya Brown.

Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact Phone #\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Medicine Hat Track and Field Publicity Waiver**

In the event that the athlete has his/her name or photo published or publicly displayed or is videotaped, a signature granting permission is required. Medicine Hat Panthers Track and Field does utilize Facebook and Twitter – photos and videos may appear.

Athlete Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Athlete: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ month \_\_\_\_\_\_day \_\_\_\_\_\_year \_\_\_\_\_\_\_\_

**Medicine Hat Track and Field Club Waiver**

I, the undersigned, understand and acknowledge that participating in the Medicine Hat Track and Field program and all activities might result in personal injury, property damage or loss and possible death. I assume all risks and hazards incidental to the conduct and transportation to and from activities.

I, the undersigned, do further herby forever release, for myself, my heirs, and any person acting on my behalf, the Medicine Hat Track and Field club, coaches, assistant coaches, members, sponsors, society members, and volunteers, any or all of them, in the case of injury to the participant whether negligence or otherwise. I waive all claims appointed by them, I likewise waive any claim against any person transporting the participant to and from the activity.

Athlete Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature Athlete: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of parent or guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ month \_\_\_\_\_\_day \_\_\_\_\_\_year \_\_\_\_\_\_\_\_

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| ***Panthers Indoor Season is open to interested athletes born 2008 – Grade 12.\*Exceptions may be made for Athletes born in 2009 who are previous outdoor track season athletes or those who have a keen interest. Please contact*** medhatpanthers@gmail.com |

**Indoor Session #1 – October 16th – Dec 14th 6:00 – 7:30 pm at the FLC track**

**Indoor Session #2 – January 8th – March 15th 6:00 – 7:30 pm at the FLC track**

**\*no track Family week Feb 19th – 22nd**

**Monday, Wednesday & Thursday: 3x week training – 9 weeks, 27 days**

**Monday and Wednesday: 2x week training – 9 weeks, 18 days**

**Monday, Wednesday OR Thursday: 1x week training – 9 weeks, 9 days**

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| **MONDAY****$110** | **WEDNESDAY****$110** | **THURSDAY****$110** | **MONDAY****&****WEDNESDAY****$185** |  **MON, WED****&****THURSDAY****$260****Panther Youth/Jr/Sr groups only** |

**Athletics Alberta Membership Fees**

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|  | **Indoor Season Only****Sept – March 2018** | **Annual Membership** **Jan – December 2018** | **HAVE Athletics Alberta Insurance & Membership** |
| **Panther Junior Group****(Tyke, Peewee, Bantam)****2005,’06,’07,’08,’09** | * $45
 | * $60
 | * No charge
 |
| **Panther Youth Group****(Midget/Youth)****2003/2004 & 2001/2002** | * $60
 | * $85
 | * No charge
 |
| **Panther Senior Group****(Junior/Senior)****1999/2000 & 1998 or 20+** | * $70
 | * $105
 | * No charge
 |

**Volunteer Commitment**

All parents/guardians are required to fulfill at least **ONE** volunteer commitment throughout each indoor/outdoor session. A **$50 cheque** is required at time of registration and will be returned to you at the end of the season if volunteer commitment was met.

**Citizenship:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Athletics Alberta #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Are you training or participating in any other sport or physical activity during this Panthers season? If yes, what days, time commitment and sport/activity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Is there anything specific that TRACK can help achieve in your Sport/Activity? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have a specific GOAL/ objective/event for training with Panthers? We want to be able to help you work towards your goals. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PARENTS AND GUARDIANS CODE OF CONDUCT**

(As extracted from the Athletics Albert Code of Conduct and Ethics Policy)

In addition to section 7 (above), parents and guardians will have additional responsibilities to:

a) Encourage good sportsmanship by demonstrating positive support for all athletes, participants, coaches, and officials at every competition, practice or other youth event.

b) Place the emotional and physical well being of the child ahead of a personal desire to win.

c) Insist that each child participates in a safe and healthy environment.

d) Require that the child's coach be trained in the responsibilities of being a youth sports coach and that the coach upholds the Coaches' Code of Conduct.

e) Support coaches and officials working with the child, in order to encourage a positive and enjoyable experience for all.

f) Demand a sport environment for the child that is free from drugs, tobacco and alcohol and will refrain from their use at all youth sports events.

g) Make every effort to ensure that the sport is fun for the child.

h) Ask the child to treat other athletes, participants, coaches, fans and officials with respect regardless of race, sex, creed or ability.

i) Help the child enjoy the youth athletics experience by providing assistance when possible, such as being a respectful fan, assisting with coaching, or providing transportation.

j) Make a commitment to volunteer and assist the sport system when asked or needed.

Parent/Guardian X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CANADIAN ANTI-DOPING PROGRAM (CADP)**

Athletics Canada has adopted the 2009 Canadian Anti-Doping Program (CADP), which is the set of rules that govern doping control in Canada.  Administered by the Canadian Centre for Ethics in Sport (CCES), the CADP applies to members of Athletics Canada and participants in Athletics Canada sanctioned activities. All members of Athletics Canada, whether in the role of athletes or athlete support personnel, are subject to the CADP.  By signing below, I acknowledge that I am a member of Athletics Canada and I am aware that the CADP applies to me and I consent to its application to me.  For further information, please visit the Athlete Zone on the CCES website <http://cces.ca/athletezone>

X\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REFUNDS: Athletics Alberta membership fees are NON refundable. Registration fees are non refundable after Oct 2nd and Dec 22nd, unless approved by executive.**

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| Registration Fee received: □ Cash □ Chq # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Volunteer Commitment received: □ Chq # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |