



REGISTRATION FORM
www.temeculatimemachine.com



Year: _____ Cross Country /Track and Field (circle one)

Athlete Name: _____ Phone #: _____

Email: _____ Date of Birth: _____ Gender: _____

Mailing Address: _____

City/Zip Code: _____

Mother's Name: _____ Mother's Cell #: _____

Father's Name: _____ Father's Cell #: _____

RELEASE AND CONSENT FOR MEDICAL TREATMENT OF MINOR

As the parent or guardian of the above named child, I hereby give consent for emergency medical care prescribed by a duly licensed doctor of medicine or doctor of dentistry. Care may be given under whatever conditions are necessary to preserve the life, limb, or well being of this child. In the event of any injury to my child, I hereby release and hold harmless from any liability for damages or claims for personal injury, including death, libel, slander or defamation of character as well as for claims for property damage, which may arise in connection with the above and against the President, Officers, Board of Directors of Time Machine, as well as any Time Machine members, Time Machine USA Track Club Incorporated in whichever corporate form it may take, USATF and AAU.

List any medical problems or restrictions of athlete: _____

Name of Insurance Carrier: _____ Plan # _____ Primary Physician: _____

Emergency Contact Information if Parent cannot be Reached:

Name: _____ Phone _____ Relationship: _____

Parent/Guardian Name _____

Parent/Guardian Signature _____ Date: _____

Parental Support is Mandatory - Please Circle How You Will Volunteer
Coach - Assistant Coach - Running Chaperone - Help organize kids at Track Meets --
Party Planner - Team Mom - Photographer - Publicity - Awards - Uniforms -
Equipment - Sponsorship/Fundraiser - Other: _____
Note: For Cross County Season Parental Support for the Grape Stomp is Mandatory!!

TVTM Use Only

Table with 4 columns: Division (Sub-Bantam, Bantam Midget, Youth, Intermediaite), Paid Date, Amt. Paid \$, Rec'd By, Birth Certificate (Copy Attached, To be submitted, Verified by USATF)