



Registration Form  
[www.tvtimemachine.org](http://www.tvtimemachine.org)

Year \_\_\_\_\_ Cross Country \_\_\_\_\_ Track and Field \_\_\_\_\_

Athlete Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City/Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_

Father's Name \_\_\_\_\_ Father's Cell #: \_\_\_\_\_

Mother's Name \_\_\_\_\_ Mother's Cell #: \_\_\_\_\_

**Emergency Contact Information:**

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_ Relationship: \_\_\_\_\_

**Medical Issues and Release Form**

List Any Medical Problem or Medical Restriction of Athlete: \_\_\_\_\_

**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 and the Time Machine itself in whichever corporate form it may take.

Name of Insurance Carrier: \_\_\_\_\_ Primary Physician: \_\_\_\_\_ Plan No.: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**Parental Support is Mandatory – Please Circle How You Wish to Volunteer**

Coach – Assistant Coach – Running Chaperone – Help organize kids at Track Meets - Fundraiser – Party Planner – Team Mom – Photographer – Sponsorship  
 – Registration – Publicity – Awards – Uniforms - Equipment – Scorekeeper – Web Master – Flyer Production

**TVTM Use Only**

<b>Division:</b> Sub-Bantam Bantam	Midget Youth	<b>Paid Date</b> /    / <b>Amt. Paid \$</b> _____  <b>Ck#</b> or <b>Cash</b>	<b>Rec'd By:</b> _____	<b>Birth Certificate:</b> copy attached to be submitted	
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Notes: \_\_\_\_\_  
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