

Ripley Ohio Dearborn Counties



2024 Spring & Summer Games REGISTRATION



NAME:		DATE OF BIRTH:		AGE:	
ADDRESS:			ATHLETE___ UNIFIED PARTNER___		
CITY:			STATE:		ZIP:
PHONE:		EMAIL:			
PARENTS/GUARDIAN:			___ I want to participate in Spring Games ONLY (Track&Field)		

Please Circle T-shirt Size:

Adult: Sm Med LG XL XX 3X 4X 5X

I Want To Participate In: (Choose only one, except Spring Games Track & Field)

___ Swimming ___ Volleyball ___ Powerlifting ___ Soccer ___ Bowling Doubles
___ Unified Bowling Doubles ___ Track & Field ___ Unified Track & Field

SPECIAL NEEDS/DIET/ALLERGIES:	Summer Games supplemental fee of \$25 to be in cash upon boarding the bus or at the Games - All participants
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SPRING GAMES DATE(S): May 18, 2024

LOCATION(S): Milan High School

***COMPETITION REGISTRATION RATE(S):** \$8.00

**Paid by the Delegation, unless not attended. See Below.*

SUMMER GAMES DATE(S): June 7-9, 2024

LOCATION(S): Indiana State University & Rose Hullman, Terre Haute

***COMPETITION REGISTRATION RATE(S):** \$140.00

___ I WILL BE RIDING THE BUS TO TERRE HAUTE

___ STAYING OFF CAMPUS WITH _____

BY SIGNING BELOW, the athlete and/or parent/guardian understand and agree with the importance of appropriate attendance and sportsmanship at all practices and Area/State competition(s). The athlete and/or parent guardian understand that seventy-five percent (75%) of practices prior to competition must be attended in order to be registered for the competition. It is also understood that if the athlete fails to attend the Area/State competition(s) that the athlete will be invoiced for the competition registration fee(s) and will be required to reimburse the Delegation prior to his/her participation in any future sports programs. Acceptable reasons for missing competition are season-ending injury, death in family, work, or medical w/physician's note. The coach must be contacted prior to missing practice/competition. Transportation is the athlete's responsibility and is not excusable for missing practice or competition.

Athlete's Signature

Date

Parent/Guardian's Signature

Date

PLEASE COMPLETE BACKSIDE.