Ripley Ohio Dearborn Counties



2020 Winter Games

REGISTRATION



NAME:		DATE O	F BIRTH:		AGE:
ADDRESS:			ATHLETE UNIFIED PARTNER		
CITY:			STATE:	ZIP:	
PHONE:	EMAIL:				
PARENTS/GUARDIAN:					
Please circle t-shirt:		I want to participate in:			
SHIRT: SMLXL2X3X _	4X5X		DAYS ONLY		ALPINE SKIING
Below info is needed for proper equipment sizing:			OVERNIGH	Г	SNOWSHOEING
SHOE SIZE: HEIGHT:	WEIGHT:				SNOWBOARDING

SPECIAL NEEDS/DIET/ALLERGIES:	

STATE COMPETITION DATE(S): Sunday, January 12 - Tuesday, January 14, 2020 STATE COMPETITION LOCATION(S): Perfect North Slopes, Lawrenceburg *COMPETITION REGISTRATION RATE(S): \$130.00

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

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.