

**Alaska Division 2007-2008
Event Registration Form & Waiver**

First Name _____ **Last Name** _____
Address _____ **City/ST Zip** _____
Phone # _____ **Email Adrs** _____

Eligibility: Every person competing in an Alaska Division event must be a current competitive USFA member. Be prepared to present your USFA card on the day of the tournament. If you have recently applied or renewed your member and do not yet have a card, bring a copy of your application or a letter/email message from the USFA verifying your membership. If you are not a USFA member and want to compete, you will be required to fill out a membership form and pay for membership on the day of the event.

Mailed entries must be received by the Secretary one week prior to the tournament. (Exception: Entries for the Junior Olympic Qualifiers will be accepted until November 15.). The Alaska Division accepts entry forms on the day of the tournament; however, we appreciate early entries. If you wish to receive confirmation that your entry was received, include your email address on the entry form or a self addressed stamped postcard. Confirmation WILL NOT be faxed, phoned, or mailed (unless you include a postcard).

Method of Payment The Alaska Division will accept check or money order payable to the Alaska Division USFA. Cash is accepted on the day of the tournament only. Please bring exact change. The Alaska Division CANNOT accept any credit card payments. If you turn in a membership application to the USFA with your entry, you may pay for the USFA membership and only the membership with a credit card. See the USFA membership form, www.usfencing.org.

Waiver of Liability & Consent for Medical Treatment

Upon entering this tournament under the auspices of the USFA, I agree to abide by the current rules of the USFA. I enter this tournament at my own risk and release the Alaska Division and all associated organizations for all liability. Further this is to certify that on this date I, _____, give my consent to the USFA and its representatives to obtain medical care from any licensed physician, hospital or clinic for the above named athlete for any injury or illness that may arise during activities associated with this tournament.

Fencer's Signature: _____ **Date:** _____

Signature of parent/guardian: _____ **Date:** _____

(If fencer is under 18 y/o)

COMPLETE ONE ENTRY FORM FOR EACH TOURNAMENT.

Office Use Only

USFA MEMBER	WAIVER	FEES PAID	EVENTS

Mail all entries to:

**Alaska Division, USFA C/O Jennifer Tobey 2315 Douglas Dr. Anchorage, AK 99517
All entrants must be a current USFA member in good standing.**