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 39-ՐԴ ՄԱՐԶԱԿԱՆ ԽԱՂԵՐ
 Թորոնթո, 27-29 Նոյեմբեր 2009



HOMENETMEN CANADA'S 39TH ANNUAL GAMES
Toronto, November 27-29, 2009

PERMISSION & RELEASE FORM

Chapter: _____ Gender (Circle one): MALE FEMALE
 Name: _____ Date of Birth (mm/dd/yy): _____
 Address: _____ City: _____
 Province/State: _____ Country: _____ Zip/Postal: _____ Phone: _____

Events (Circle all that apply):	Division (Circle one per Event):
BASKETBALL	SENIOR JUNIOR MIDGET BANTAM VETERAN
VOLLEYBALL	SENIOR JUNIOR VETERAN
TABLE TENNIS	ALL AGES
FLOOR HOCKEY	SENIOR JUNIOR
INDOOR SOCCER	SENIOR JUNIOR MIDGET BANTAM VETERAN
TRACK & FIELD	18+ 16-17 14-15 11-13
CHESS	ALL AGES
Track & Field Events (Circle up to 3 events, plus RELAY):	
60M 150/200M 600M 1000M	HIGH JUMP LONG JUMP SHOT PUT RELAY 4x100

Father's Name: _____ Phone: _____
 Mother's Name: _____ Phone: _____
 Emergency Contact: _____ Relationship: _____ Phone: _____
 Health Card # / Health Insurance Name and #: _____
 Allergies: _____ Medication: _____

Current medications/conditions (Circle any that may apply):
 DIABETES ASTHMA HYPERTENSION HEART DISEASE

Please provide any other conditions we need to be aware of:

I, _____, the parent/legal guardian of _____,
 Give Homenetmen, coaches, committee members, executive officers, the right to take my son or daughter to the emergency room in the event of any injury. I further give Homenetmen, coaches, committee members, executive officers, the ability to make medical decisions on my behalf in the event of an emergency when I am unreachable by phone.

Athlete Signature: _____ Date: _____
 Parent/Guardian Signature: _____ Date: _____
 (if under 18)

TOURNAMENT FEE: \$45
 Includes Participation Fee and Entrance to Saturday Night Victory Dance with Dinner