

## EASTERN REGIONAL #3 Hosted by Quinte Blades Belleville, Ontario



## **INDIVIDUAL ENTRY FORM**

Name:				Club:			
Address:				Phone:			
City:			Province:		Postal Code:		
Date of Birth	mm/dd/yy	Age Class:		Gender:	☐ Female	☐ Male	
400m or 500m Seed Time:	(new racers only)	□ 400m (100m) □ 500m (111m)	Helmet #: Email:				
MANDATORY EC	QUIPMENT:						
pads, shin guard must be rounded	s, ankle protector	you are wearing a Keves, and long sleeve cloresistant protective spatic strap.	thing for this co	mpetition. 1	he tips of skate	e blades	
In consideration assigns waive an The Ontario Spec agents, officers,	d release any and ed Skating Associa or members for a	this entry, I hereby for all rights and claims ation, the Quinte Blad ny and all injuries suf Ontario. I understan	for damages I m les Speed Skatin fered by me at t	ay have aga g Club, the ( he said cont	inst Speed Skat City of Belleville cest to be held	ting Canada, e, their on	
In witness wher	reof, I have here	unto set my hand a	nd seal, this _	da (day)	y of(month)	20(yr)	
Signature of participant			. Si	Signature of parent or guardian (if participant under 18)			

This is information is collected under the authority of the Freedom of Information and Protection of Privacy Act. It is required to register you in this competition. Financial information will be used to process payment.

Organization of competitions/ events required that names will appear on posted race lists and results print outs. Names/Images of participants may be published on boards, websites, media, newsletters and promotional

**ENTRY DEADLINE:** November 19, 2014 at 10:00pm

material. Alternative contact and medical information will only be used in a medical emergency. If you have any questions about the collection of or use of this information, contact the Competition/Event Organizer at 613-477-1960 or <a href="mailto:caneanderson@hotmail.com">caneanderson@hotmail.com</a>