Central Valley Roadrunner Track Club (CVRR)

2024 Track Season Permission Slip and Medical Release Club Fees \$250**Nonrefundable

Payment due no later than February 3, 2023

- /
Accounting Use Only
\$ \$ \$ \$
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Athlete Information:

Name:		Date of Birth:		
Please indicate by circling Adult	or Youth Size			
Uniform Size: Shirt Sho	orts Warm Up S	ize: <u>Jacket</u>	Pants	
USATF Number:				
Parent/Guardian #1 Inform	ation:	Parent/Guardian #2 Information:		
Name:	Name:			
Address:	Address:			
Phone: (Home)	(Home)			
Phone: (Cell/Message)	(Cell/Mess	age)		
E-mail address:	E-mail add	ress:		
Medical Provider Informati	on:			
Name:				
Address:				<u> </u>
Phone:				_
Insurance Information:				
Insurance Company:				
Member ID/Group Number:				
Member Name:				
Emergency Contact Informa	ation (if parent/guardian is	s not available):		
Name:		Relation	ship:	
Phone: (Home)	(Cell/Messa	ge)		
I give my child permission to be coaches of the Central Valley Ro of a medical emergency.				
Parent/Guardian Signature			Date	

**Fee covers the cost of uniform, warm-up and meet entry fees.

Central Valley Roadrunners PO Box 5372 Modesto, CA 95352-5372