

# Bloemfontein Striders RACE ENTRY FORM

Name & Surname: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_ ID no / Birth Certificate no / Passport no: \_\_\_\_\_

Residential / Postal Address: \_\_\_\_\_

Email: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Province / Country: \_\_\_\_\_

Next of Kin: \_\_\_\_\_ Emergency Contact No: \_\_\_\_\_

Club/Indiv: \_\_\_\_\_ Licence No: \_\_\_\_\_

Age Category: \_\_\_\_\_ Age on the day of race: \_\_\_\_\_ Amount Due: \_\_\_\_\_

***\*Athletes must familiarize themselves with the route.***

***\*All category winners must show ID if requested; Wearing of age bib compulsory***

ENTRY: Mark with x:                      **10KM** \_\_\_\_\_ **5KM Fun Run** \_\_\_\_\_

## WAIVER INDEMINITY AND CONSENT

By entering this event, I undertake to be bound by the rules and regulations of the event including those of WA, ASA and AFS which include the payment of the entry fee. I warrant that I am in good health, physically fit and have sufficiently trained to participate in this run and aware of the risks and dangers of physical nature of this sporting event and do not claim ignorance of these risk and dangers. I hereby accept that I participate in the event entirely at my own risk and I release and discharge, to the fullest extent allowed in law, the organiser of the event, provincial and national athletic bodies and all local authorities from the responsibility, liability or costs relating to any injury, loss or damage of whatever nature, including pre-and post-race activities. I further agree and warrant that if at any time I believe conditions to be unsafe (breathing), I will immediately discontinue further participation in activity.

**MINOR RELEASE:** and I, the minor's parents and /or legal guardian, understand the nature of the athletic activity and I the minor's experience and capabilities and believe the minor to be qualified, in good health, and in proper physical condition to participate in such activity and I enter into this indemnity /waver on behalf of the minor.

Competitor's **name in print and signature** or (Parent/Guardian **signature** 18 y and younger) \_\_\_\_\_

Date \_\_\_\_\_ (In accordance with the rules of WA & ASA & AFS)

**Please specify:** I am interested to be selected for a FS Road Running Team to partake in an ASA Championship Road Race in 2022: Yes \_\_\_\_\_ or No \_\_\_\_\_

Event organiser- Jaco Ebertsohn-0716824725

Technical official-Francois Booysen- 618011713

Safety officer-Henry Jordaan 0760464005

Emergency No on Race Day- 082 951 3009

Medical Services: Life Rosepark

