



ENTRY FORM

Date _____

Name _____

Address _____

Phone Number _____

Date of Birth _____

Age Group _____ Male Female

QA/QMA Club Rego Number _____ Visitor

Tick the box for each event you wish to compete in.

60m Seed time _____

100m Seed time _____

100yards Seed time _____

150m Seed time _____

200m Seed time _____

250m Seed time _____

300m Seed time _____

400m Seed time _____

600m

800m

1000m

1500m

3000m Run/Walk

5000m Run/Walk

80/100m Hurdles

Long/Triple Jump

Shot Put

Discus

Javelin

Hammer

Weight Throw

56lb Heavy Weight/
Super Heavy Weight

By signing this form, I agree that participating in athletics I am exposed to inherent risk of injury. By engaging in this athletics competition, I freely accept and fully assume all inherent risks, dangers and hazards that may cause serious personal injury. I accept and assume all risks and responsibility for losses, costs and damages I may incur as a result of my participation. I also agree to abide with all applicable COVID requirements.

Sign _____