



ROYAL CANADIAN LEGION ONTARIO PROVINCIAL COMMAND

I, the undersigned, grant to The Royal Canadian Legion, Ontario Provincial Command permission to use images of me photographed at the 2019 District “D” Track and Field Championships for purposes of display, ceremonies, publication and digital representation and other purposes in relation to the promotion of The Royal Canadian Legion and/or the Legion Provincial Track and Field Championships. I also give consent for the free use of my name and/or picture in any broadcast, telecast or other account of the above event.

Name of Athlete (please print)

Signature of Athlete

Name of Parent/Guardian (please print)

Signature of Parent/Guardian

Athlete's Phone Number (please print)

Athlete's Email (please print)

District D – Royal Canadian Legion Track & Field
Provincial Meet Confirmation Forms –Athletes Age 17 & under and 15 & under Only
PLEASE READ CAREFULLY

In past years, the team has been selected that will represent District “D” at the Provincial Meet, athletes agreed to participate and then have cancelled at the “last minute”. By doing this, it has made it next to impossible to find a replacement in time. Also, it leaves our team short of participants and it affects the funding level. Therefore, we ask that you and your child read the following, then complete, sign it and forward with the regular consent forms for the District “D” meet. By advising us in advance of your intentions, it will make the selection of the team easier. **IF SELECTED TO THE TEAM, THE ATHLETE AGREES TO TRAVEL AND STAY WITH THE TEAM. ALSO AGREE TO REIMBURSE DISTRICT D THE COST OF ACCOMMODATIONS, IF YOU CANCEL AFTER AGREEING TO PARTICIPATE.**

Thank you for your cooperation,

Dan Burri, District D Track & Field Chairman

Athlete Name (please print)

Age group (please check) F15___ F17___ M15___ M17___

**Should I meet the Provincial standards (please check the applicable), I AGREE TO TRAVEL AND STAY WITH THE TEAM AND IF I CANCEL AFTER AGREEING TO PARTICIPATE – I WILL REIMBURSE DISTRICT D THE COST OF ACCOMMODATIONS. YES, I WISH TO BE CONSIDERED: _____
NO, I DO NOT WISH TO BE CONSIDERED: _____
FOR SELECTION TO ATTEND THE PROVINCIAL MEET.**

By agreeing to be considered, the athlete and their Parent/Guardian agree that **IF** the athlete cancels or does not attend the Provincial Meet, they will not be considered for future selection unless extraordinary circumstance dictate. The athlete and Parent/Guardian agree that the athlete will travel and stay with the team.

I have read and agree to the above in consideration of selection to attend the Provincial Meet to be held JULY 12TH and 13TH, 2019 IN BRAMPTON, ONTARIO AT THE TERRY FOX SPORT COMPLEX.

Note the team will be leaving on FRIDAY, JULY 12TH AND RETURNING ON SATURDAY, JULY 13TH, 2019 after the meet SATURDAY, JULY 13TH, 2019.

Athlete’s Signature _____ **Date** _____

Parent/Guardian’s Signature _____ **Date** _____

Athlete’s Email (please print) _____