

Contact person in case of emergency

Surname

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Title (Mr/Mrs/Miss/Dr)

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Name

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Initials

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Relationship

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Tel code

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Telephone number (home)

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Tel code

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Telephone number (work)

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Cellphone number

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By signing this form, I hereby declare that the above information given is true and correct. I further declare and agree:

- To abide by the constitution** of Brimstone - Itheke Sport Athletic Club
- To abide by the rules and regulations of ASA *** (Athletics South Africa) and WPA (Western Province Athletics)
- To indemnify Brimstone - Itheke Sport Athletic Club, its coaches, officers and assistants against all and any action of whatever nature for any loss, damage, illness or injuries that may be sustained or arise out of my participation in any training session, race or social event
- That it is my responsibility to ensure that I am medically fit to train and compete in any race
- To at all times behave in such a manner so as not to bring the name of Brimstone - Itheke Sport Athletic Club into disrepute
- To at all times inform Brimstone - Itheke Sport Athletic Club of any change in medical conditions and any other relevant information

Please tick here if you would like to receive promotional material from club and race sponsors

Signature of Brimstone - Itheke Sport AC Applicant

Date:

Signature (Parent / guardian signature if where applicant is under 18 years)

Date:

** The constitution of Brimstone - Itheke Athletic club can be found at www.itheko.club

*** Rules and regulations of the WPA and ASA can be found at www.wpa.org and www.athletics.org.za

Please return this signed and completed form, payment or proof of payment, & copy of ID to Armien Fakier at the clubhouse or mail to admin@itheko.club

For more information: admin@itheko.club and the membership page at www.itheko.club

WELCOME TO THE BRIMSTONE - ITHEKO SPORT ATHLETIC CLUB FAMILY !!