

# 2010 Southeast Section Fencing Championships – Entry Form

Applicant's Name \_\_\_\_\_  
(Last) (First) (M.I.)

Permanent Address \_\_\_\_\_  
(Street)

\_\_\_\_\_  
(City) (State) (Zip) Telephone #

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_ E-mail \_\_\_\_\_

USFA Member # \_\_\_\_\_ Division \_\_\_\_\_ Full Name of Club \_\_\_\_\_

**REGISTER ON ASKFRED OR MAIL ENTRY TO: (Entry deadline is April 25, 2010)**  
**Debbie Walker, 137 Irwin Street East, Safety Harbor, FL 34695**

**For Questions: contact – Debbie Walker (SES Secretary) - (727)724-8768 or [dwalker79@hotmail.com](mailto:dwalker79@hotmail.com)**  
**William Becker (SES Chairman) - [cane@mindspring.com](mailto:cane@mindspring.com)**

**Requirements for Eligibility: Every person competing in the SES Championships must:**

1. Be a current competitive USFA member. (Expiration year 2010 or later), **Proof is required at check-in**
2. U-19 Events: the fencer must have a birth year in 1991 through 1997
3. Senior Events: the fencer must have a birth year of 1996 or earlier.
4. Must be a member of one of the following divisions: Alabama, Central FL, Gateway FL, Georgia, Gold Coast FL, N. Carolina, S. Carolina, Tennessee, or Virginia.

All participants **MUST** read each of the following statements and then sign at the bottom where indicated (for athletes under the age of 18, a parent or guardian must also sign)

**WAIVER OF LIABILITY:** Upon entering the SES championships, I agree to abide by the current rules of the USFA. I understand and appreciate that participation in sport carries a risk to me of serious injury, including permanent paralysis or death. I voluntarily and knowingly recognize, accept and assume these risks and release the USFA, the Southeast Section, the event organizers, their representatives and the venue operators from any liability.

**CONSENT FOR MEDICAL TREATMENT:** This is to certify that on this date signed below, I give my consent to the USFA and its representatives to obtain medical care from any licensed physician, hospital or clinic for the above named athlete for any injury or illness that may arise during activities associated with the Southeast Section Fencing Championships.

**ATHLETES UNDER 18 YEARS OLD:** I have explained to my son/daughter the above-stipulated conditions and their effects. I consent to his/her participation in this competition under the above-mentioned conditions stated for waiver of liability, medical consent, and doping control.

Fencer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature of Parent or Guardian for Minor \_\_\_\_\_ Date \_\_\_\_\_

**NUMBER OF QUALIFIERS:**

- **SENIOR EVENTS:** Place in the top 25% (with a minimum of 8) at the SES Championship
- **JUNIOR (U-19) EVENTS:** Place in the top 25% at the SES Championship

CHECK EVENTS	A	B	C	D	E	U	YEAR EARNED	COST
MF								
MS								
ME								
WF								
WS								
WE								
U19-MF								
U19-MS								
U19-ME								
U19-WF								
U19-WS								
U19-WE								
<b>Registration Fee – (Non-refundable)</b>								<b>\$25.00</b>
<b>TOTAL REMITTED</b>								

**Senior Events = \$25.00 per event**  
**Junior (U-19) Events = \$25.00 per event**

**Registration options:**

1. **MAIL** (Postmarks are not considered). Entries **MUST** be received by: **April 25, 2010**

**Make Checks Payable to: Southeast Section USFA**  
**For Entry Confirmation, include a self addressed, stamped envelope or a working e-mail address**

**OR**

2. Register on ASKFRED

**LATE ENTRIES WILL BE ACCEPTED AT THE DOOR AT TRIPLE FEES!**

For refund of the event fee, withdrawals must be submitted in writing to the SES Chair, William Becker by April 25, 2010.