



# Registration

Please send your completed form to: [lmills@ESSportsCouncil.org](mailto:lmills@ESSportsCouncil.org)

## REGISTRATION INFORMATION

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ Gender \_\_\_\_\_

Team Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age on Meet \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

## EMERGENCY CONTACT

Contact's Name \_\_\_\_\_ Contact's Phone Number \_\_\_\_\_

## EVENT SELECTION

- 1 \_\_\_\_\_
- 2 \_\_\_\_\_
- 3 \_\_\_\_\_
- 4 \_\_\_\_\_

## EVENT LIMITS

- Age 12 and under: 3 events
- Age 13-18: 4 events
- Age 19+: 4 events

## MEET SELECTION

- Patriot's Invitational (5/31/26)
- Constitution Classic (6/7/26)
- Adirondack Combined (6/19/26)
- Adirondack Champs (6/20/26)
- Liberty Games T & F (7/11/26)

## FEES (All meets except Adirondack Champs & Liberty Games)

- Youth: \$20
- Adult: \$30

## FEES (Adirondack Champs & Liberty Games)

- Youth: \$25
- Adult: \$35 / 2 events; \$5 /each additional event
- Triathlon/Pentathlon: \$25
- Heptathlon/Decathlon/Throws or Masters Pentathlon: \$35

## TOTAL AMOUNT AUTHORIZED OR ENCLOSED

Card Provider (Visa/MC) \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Credit Card Number: \_\_\_\_\_ Code: \_\_\_\_\_

## I ACCEPT

By checking this box, I confirm that the Athlete and Parent/Guardian accept all rules and regulations as well as authorize this transaction by Liberty Group. I understand that if the total registration cost I have submitted in the field above labeled "registration amount" is incorrect, I will be billed the proper amount for my registration without further notification. I understand there will be no refunds for my non attending for any reason.

## WAIVER

In consideration of your acceptance of my entry, I hereby for myself, my heirs, executors, administrators and assigns, waive all claims to damages which I might have against Empire State Sports Council, their Board of Directors and staff, event officials, volunteers, sponsors and site entities for any and all injuries suffered by me at said events.

Entrant: \_\_\_\_\_ Date: \_\_\_\_\_

If entrant under 18, Parent or Guardian Signature: \_\_\_\_\_