



National Judges Cup - Level 7 All Star State Challenge  
 Coach Registration Form  
 January 4-6, 2019  
 Overland Park Convention Center- Overland Park, KS

**Coach Information**

The coach must be a current professional member in USAG.

*Please enter coaches name as it would appear on an airline ticket.*

*Must also match legal form of ID used for travel (i.e. Passport, Driver's License)*

			MM	DD	YYYY			
First Name	Middle Name	Last Name	Birth Date		USAG Number	Male/Female	Phone	

Address	City	State	Zip Code

Gym Name	Email

WOMENS: <input type="checkbox"/> XS <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL MENS: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL
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T-Shirt Size (Select One)

**Medical Information & Releases**

In Case of Emergency:

Name	Relationship	Phone

Name	Relationship	Phone

Please detail any current medical conditions or allergies:
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**Medical Insurance Information**

Company	Policy Number	Group Number	Phone	Physician Name	Physician Phone

**Liability Waiver: I assume all risks and hazards incidental to this event. I do further release, absolve, indemnify and hold harmless the event sponsors, chaperones, judges, volunteers, equipment suppliers, their agents, representatives or assigns, for any injury to my athlete(s) or me, attributable to the absence of ordinary or even slight care by the event organizers, equipment suppliers, facility owners, or conduct of this event. Finally, I agree to the use of my image/likeness in any materials including, but not limited to, those in print, publication, broadcast, and/or on the internet resulting from participation in this event. The signature below attests to this.**

Signature	Printed Name	Date