



MY TEAM TRIUMPH
MINNESOTA
MYTEAMTRIUMPH-MN.ORG

Angel™ Application

Please complete this form and return to myTEAM TRIUMPH, c/o Benjamin Delkoski 19947 Hexham Way, Lakeville, MN 55044. Or you can email this form to bdelkoski@myteamtriumph-mn.org

Name: _____ Date: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Birth Date: _____ Marital Status: Married _____ Single _____

T-Shirt Size: _____

Spouse Name (Optional): _____

Children's Names and Ages (Optional): _____

Emergency Contact and Phone: _____



SPORTS PARTICIPATION HISTORY

(Only required if running 13.1+ miles)

Grade School/Junior High: _____

High School Spots: Events, Times: _____

College: Events/Times: _____

Best Race times: 5K _____ 10K _____ 15 K _____ ½ Mara _____ Marathon: _____

Most recent race; date: _____

My preferred racing distances are: _____

Short Term Goal 3 months: _____

6 Months: _____

1 Year: _____

Please provide the last 2 weeks of your training program as accurate as possible: what you did each day, number of minutes or miles, added fitness activity, other recreational/sport activities.

WEEK 1 - From: _____ **to** _____

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

WEEK 2 - From: _____ **to** _____

Monday: _____

Tuesday: _____

Wednesday: _____

Thursday: _____

Friday: _____

Saturday: _____

Sunday: _____

WAIVER

By signing I acknowledge my understanding that my participation in any myTEAM TRIUMPH event and/or any pre- or post-event activities including any training sessions or other preparatory activities (collectively, the “Event”) involves rigorous physical activity and that it potentially may be hazardous. I attest and verify that I am either physically fit and have sufficiently trained for the Event or, if appropriate, my physical or mental fitness to participate in the Event has been approved by a licensed medical doctor. I expressly assume all known and unknown risks associated with the Event, including but not limited to: loss of or damage to my property; injury (including death); accidents; the effects of weather; and terrain conditions that may vary widely, and that may include uneven and/or slippery surfaces, spectators, participants, and natural and manmade obstacles (including without limitation, vehicles, security barriers, signs, cables, mats, and debris on the course). In consideration of my participation in the Event, I, for myself, my heirs, executors, administrators, personal representatives, successors and assigns, waive any and all rights, claims and causes of action I have or may have against any Race Organizer that may arise as a result of my participation in the Event except for instances of gross negligence. For these purposes, a “Race Organizer” is any one or more of the following: myTEAM TRIUMPH and their affiliates; all governmental agencies representing the territory in which the Event will be held; all sponsors, agents, vendors, and contractors of or for the Event; medical service providers; and the officers, directors, employees, representatives, successors and assigns of each of the foregoing. I hereby agree to indemnify all Race Organizers for all claims and losses (including attorney’s fees and court costs), which may be brought against any one or more of them by anyone claiming to have been injured or otherwise to have suffered loss or damage as a result of my participation in the Event.

I further grant full permission to any and all of the foregoing to store, use and/or reproduce my image or likeness by any audio and/or visual recording technique (including electronic/digital) now in existence or hereafter invented, for any legitimate purpose, including commercial sales and marketing purposes. I understand and agree that information about me that is collected by the Race Organizers, including without limitation information on this form and my Event results may be disclosed to third parties for any legitimate purpose, including commercial sales and marketing purposes, and that it may be subject to re-disclosure by the recipient(s).

I acknowledge and agree to abide by any Official Rules for the Event that may be posted at the Event or on the Event’s website. I hereby represent and warrant that I am 18 years of age or older or, if applicable, that I am the parent or legal guardian of the child under the age of 18 years old who I am registering for the Event and that I have the full power and authority to agree to these terms on behalf of such child, and to bind him/her to these terms.

By signing this document, I am providing the above named Organization my consent for an initial background check as well as any subsequent background checks deemed necessary throughout the length of my volunteer/employment assignment with this Organization.

Signature of Athlete _____

Date _____

Signature of Parent Guardian (If under 18 years of age):

Date _____