



BC Athletics

BC Team Selection Acknowledgement Form

This will acknowledge that I, _____ (print athlete name) have been selected to the _____ (enter team name) and hereby accept my selection to this team which will be traveling on from _____ (enter travel dates). Furthermore, I acknowledge that (initial below):

_____ I have read, understood and agree to adhere to the **BC Athletics Code of Conduct**;

_____ I, have read, understood and agree to adhere to the **BC Athletics Policy on Harassment**;

_____ I, agree to pay my BC Athletics BC Team Fees associated with the above named team by the method indicated on my Athlete Declaration Form. Unless waived as a Nationally Carded Athlete.

_____ I, agree to disclose any pre-existing injuries that may knowingly impede my performance at the BC Team Competition resulting in a NON-COMPETITION.

_____ I, agree to wear my BC Athletics issued uniform during COMPETITION and MEDAL CEREMONIES, unless I have received an exemption from the BC Athletics Technical Manager.

Name of Primary Coach (Print)

Name of Athlete (Print)

Primary Coach Signature

Athlete Signature

Date

Date

Please return this form to BC Athletics prior to the Team Departure Date.

For athletes **under 19 years of age**, please have your parents/legal guardians print and sign below.

Scan & Email – chris.winter@bcathletics.org

Fax - (604) 333 - 3551

Mail or in Person at address below

Name of Parent/Legal Guardian (Print)

Parent/Legal Guardian Signature

Date