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REGISTRATION FORM

Sunday 21st October, 11.00am at the Kaiapoi High School Back Field

Team Name

Team Member 1	D.O.B
Team Member 2	D.O.B
Team Member 3	D.O.B
Team Member 4	D.O.B
Team Member 5	D.O.B
Team Member 6	D.O.B

- The Top Team Challenge is run by Sport Canterbury
- Teams consist of 6 members (minimum age to participate is 8)
- All team members must attend the briefing at 10.45am.
- The Top Team Challenge will begin at 11.00am.
- Water activities may be involved. We encourage team members to bring a towel and a change of clothes.
- Sport Canterbury hold a full Risk Management Plan for the Top Team challenge which provides the parameters for all stakeholders including staff, volunteers, management and participants.
- You Me We Us Kaiapoi will have a trained first aid provider on site at the Top Team Challenge event.
- No refunds will be given to teams cancelling their registration.
- Cancellation – You Me We Us Kaiapoi will offer a 50% refund of entry fees per team should the event be cancelled due to forces outside of the organisers control such as weather. However, we will do our best to postpone the event.
- You Me We Us Kaiapoi may use names and pictures of participants competing in the Top Team challenge in the media and for marketing purposes. Please let us know if you we do not have your permission for this.

ENTRY FEE: \$10.00 per team (you must register and pay the entry fee by Wednesday 17th October)

- Drop payments (cash only) and registration to the You Me We Us Kaiapoi office, 24 Sewell Street, Kaiapoi
- Email registrations to: yomeweuskaiapoi@gmail.com and direct credit payments to:
You Me We Us Kaiapoi 03 1585 0128775 00 (use team name as reference)

Team Waiver and Disclaimer (to be signed by the adult of the team on behalf of all team members)

We agree to enter this Top Team Challenge at our own risk and will not hold Sport Canterbury, You Me We Us Kaiapoi, sponsors or any person involved in the event liable for any loss or injury to equipment or person incurred during the event.

Name: _____ Signature: _____ Date: _____