## TNT@TNU TEEN ENTRANT & SPECTATOR REGISTRATION FORM - PART I

## LOOK FOR EVENT RULES AND INFORMATION AT **mvnazarene.org**

\$125 Postmarked by: February 5; Mail Form to: Mike McAdory, PO Box 645, Clearwater, SC 29822 (Please PRINT all information)

(Zip Code) irth/
irth//
irth//
luation:
iuation
edium Large XL XXL XXXL
(Check Adult Spectator
AGE LEVEL IN INDIV. SPORTS
Junior High (ages 11-13)
Middle High (ages 14-15)
Senior High (ages 16-19)
ment (*) style event. Display events (art, creat on Event AL MUSIC tal Brass Solo Solo Instrumental Percussion Solo ercussion Solo tal Strings Solo ds Solo tal Group  SPORTS  Gnnis   ** Country Run nt  Rocket League Xbox One)**
Soodgeball Gaga Ball** oftball Ultimate Frisbee Basketball Football Soccer Volleyball asketball each Volleyball lag Football
֡

TNT REGISTRATION FORM – PART II

Dates: April 4 – 7, 2024 Place: Trevecca Nazarene University

Fees: \$290

333 Murfreesboro Rd. Nashville, TN 37210 www.trevecca.edu

## THIS TNT @ TNU EVENT IS SPONSORED BY THE USA/CANADA SOUTHEAST FIELD NAZARENE YOUTH INTERNATIONAL IN COOPERATION WITH TREVECCA NAZARENE UNIVERSITY.

YOUTH SPONSORS MUST RETAIN A COPY OF THIS ORIGINAL RELEASE FORM THROUGHOUT TNT FOR ANY MEDICAL EMERGENCIES. THIS ORIGINAL FORM MUST BE SUBMITTED TO THE TNT @ TNU OFFICE TO BE RETAINED DURING TNT.

Name of Participant:	
(All <sub>I</sub>	INSURANCE AND MEDICAL INFORMATION participants must be covered by their own personal insurance.)
Please list any medical problems:	
Allergies:	
Past Surgeries:	
Name of medications & dosage you will	be taking at the time of the event:
List medications you are allergic to:	
Home Phone: ()	Work Phone: () Cell Phone: ()
	Contact Person:
Insurance Company	Policy #
	E Field Conduct Guidelines and promise to live within these guidelines during TNT @ TNU. I also ors and be under their authority. I am aware that failure to do so will result in disciplinary action.
	(Teen Signature)
attention or to authorize treatment at any the TNT@TNU staff as those who will necessary, will be a warning and instruction son/daughter, I uschedule, and that he/she may not be un assistants of TNT@TNU, Trevecca Natactions of any kind whatsoever, arising	Nate Barefield, who is the NYI President of the South Carolina District, to obtain necessary medical phospital in the event of a medical emergency. I also recognize the authority of all adult sponsors and supervise this event and uphold proper conduct. The first step of discipline, should such become tion. The second will be a telephone call to the parent or guardian concerning the participation of my inderstand that the event of TNT@TNU will require my son/daughter to make choices and to keep a der direct adult supervision at all times. I agree to release and hold harmless any and all staff and lay tarene University, or of the South Carolina District NYI from any and all claims, suits, costs, and from their exercise of the power granted by this authorization, unless due to verifiable negligence. Ittend TNT@TNU. <b>NOTE:</b> Valuables should be left at home!
Parent/Guardian Signature	(*****Signature must be in the presence of a Notary Public****)
	r said County and State/Province this day of,
personally appeared	
Whereof, I have hereunto set my hand	and Notary Seal.
State/Province of: South Carolina	<b>County of:</b>
Notary Public Signature:	My Commission expiration date:/

\*\*\*\*\*\*NOTARY SEAL \*\*\*\*\*