

**REGISTRATION DEADLINE
JUNE 17, 2005**



America Series

www.americaseries.net

First Name

Last Name

Address

Phone

E-mail

IPC Classification **T** Gender **M** **F**

Birthdate MM/DD/YY

Country of Citizenship

T-Shirt Size **S** **M** **L** **XL**

FEE \$20 USD

Wire transfer information upon request.

Mail/Fax entry form and payment to:

America Series
1850 Willshire Glen
Alpharetta, GA 30004-1874
USA

Domestic Fax
404.745.8682

International Fax
0 11 1 404 7458682

***Athletes must register by June 17, 2005 to be eligible for scores in the series.**

***Registration for the America Series does not register you for individual events.**

Release of Liability and Image:

In of acceptance of this application, waive any and all claims and release The United States Disabled Athletes Fund, The Shepherd Center, Fulton County School District, Vie Sport Marketing, The City of Atlanta and any officials, City of Cedartown, the Cedartown Training Camp, America Series Organizing Committee (AS), The Rolling Rampage, the Nick Katsounis Memorial Race, AS sponsors, agents, servants, representatives, and contractors, from any and all claims or liabilities of any kind arising out of my participation in the America Series even though that liability may arise of negligence or carelessness on the part of the persons named in this waiver. I further waive any claims against the event organizers for personal property damage or theft and acknowledge that the event organizers are not responsible for the damage or lost of any competitor's personal property. I my signature I certify that I am medically able to perform these events, in proper physical condition, am properly trained and have adequate racing skills to participate in these events. I assume all risks associated with participating in this event, including but not limited to falls, contact with other participants, effects of weather, including heat and humidity, traffic and the condition of roads, all such risks being known and appreciated by me. I give permission for the use of my name and/or photographic images of myself in any broadcast, telecast or other media account of this event. I give permission to the AS and Vie Sport Marketing to use my name and/or photographic images of myself acquired at this competition in any promotional capacity for the AS, the Meet in the Heat, and the World Wheelchair Racing Series.

Signature _____ Date _____