



ENTRY FORM

KAMLOOPS 2010 WORLD MASTERS ATHLETICS
INDOOR CHAMPIONSHIPS

I. PERSONAL INFORMATION ATHLETE COMPANION Age on March 1st/2010:

SURNAME: _____ MIDDLE INITIAL: _____
 GIVEN NAME: _____ DATE OF BIRTH: _____
 ADDRESS: _____
 POSTAL CODE: _____ CITY: _____ COUNTRY: _____
 STATE/PROVINCE: _____ *Country of Citizenship: _____
 TELEPHONE: _____ *if country and country of citizenship differ, a
 special explanation/approval is required.
 FAX: _____
 EMAIL: _____
 Name of Accommodation (if known) while in Kamloops: _____

2. CATEGORIES

SEX	35-39	40-44	45-49	50-54	55-59	60-64	65-69	70-74	75-79	80-84	85-89	90-94	95-99	100+
WOMAN	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
MAN	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____

EVENTS

STADIA • Please put an X beside each event and give your best time over the last 2 years for each column.

Gender	Event		
M & W	60 M	<input type="checkbox"/>	_____
M & W	200 M	<input type="checkbox"/>	_____
M & W	400 M	<input type="checkbox"/>	_____
M & W	800 M	<input type="checkbox"/>	_____
M & W	1500 M	<input type="checkbox"/>	_____
M & W	3000 M	<input type="checkbox"/>	_____
M & W	60 M Hurdles	<input type="checkbox"/>	_____
M & W	4 x 200 M Relay	<input type="checkbox"/>	_____
M & W	3000 M Track Race Walk	<input type="checkbox"/>	_____
M & W	High Jump	<input type="checkbox"/>	_____
M & W	Pole Vault	<input type="checkbox"/>	_____
M & W	Long Jump	<input type="checkbox"/>	_____

Gender	Event		
M & W	Triple Jump	<input type="checkbox"/>	_____
M & W	Shot Put	<input type="checkbox"/>	_____
M & W	Weight Throw	<input type="checkbox"/>	_____
M & W	Indoor Pentathlon	<input type="checkbox"/>	_____

NON-STADIA

M & W	8 KM Cross Country	<input type="checkbox"/>	_____
M & W	10 KM Road race Walk	<input type="checkbox"/>	_____
M & W	Half Marathon	<input type="checkbox"/>	_____

WINTER THROWING

M & W	Hammer Throw	<input type="checkbox"/>	_____
M & W	Discus Throw	<input type="checkbox"/>	_____
M & W	Javelin Throw	<input type="checkbox"/>	_____

3. FEES

Registration Fee: per athlete	\$55.00 CDN X I = \$55.00
Each Individual Event: per event	\$25.00 CDN X <input type="checkbox"/> =
Pentathlon:	\$60.00 CDN X I =
Half Marathon:	\$55.00 CDN X I =
WMA Athlete Levy:	\$15.00 CDN X I = \$15.00
WMA Doping Control Surcharge:	\$5.00 CDN X I = \$5.00
Athletes Party Entertainment, Music and Food	\$25.00 CDN X <input type="checkbox"/> =
Results Booklet:	\$20.00 CDN X <input type="checkbox"/> =
Late Entry Fee: per event	\$25.00 CDN X <input type="checkbox"/> =

TRANSPORTATION FEES:

Athletes Transportation Pass	\$25.00 CDN X I =
Fee for use of Kamloops World Masters Shuttle bus system to and from venues, hotels, Athletes Party and Athletes Village.	
Accompanying Person Optional - as above	\$35.00 CDN X <input type="checkbox"/> =
Accompanying Person under 14 Optional - as above	\$15.00 CDN X <input type="checkbox"/> =
Transportation fee for non-stadia athletes to visit competition venue one day prior to event Optional - as above	\$10.00 CDN X I =

Total Pre-ordered Meals

See next page for meal details

TOTAL:

CDN = _____



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4. PRE-ORDERED MEALS (NO REFUNDS)

Per Day	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Bag Lunch \$8.00 CDN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buffet Lunch \$15.00 CDN	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Buffet Dinner \$20.00 CDN	<input type="checkbox"/>	<input type="checkbox"/>	N/A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Special Diet Requests: _____

Buffets are available at the Campus Activity Centre near the Tournament Capital Centre. 300m distance.

Bag Lunches will be delivered to the Tournament Capital Centre.

5. ENTRY SYSTEM

All entries of athletes affiliated to the WMA are to be sent to the Masters National Affiliate of their country. Entries will not be accepted without a validation stamp from that affiliate.

6. DEADLINE FOR ENTRIES

January 9th, 2010. Late entries may be accepted but are not guaranteed to be included in the Championships' official program. Late entry forms and a late fee of \$25.00 CDN per event must be returned to the organizing committee no later than February 9th, 2010. **No entries will be accepted after this date.**

7. PAYMENTS

Most athletes are required to enter through their affiliate. They will make payment to that affiliate at the time of entry per the specific instructions of the affiliate. Those that have no affiliate will enter directly to Kamloops. They will be required to make payment arrangements with Kamloops before the entry will be accepted.

8. DRUG TESTING

WMA will conduct drug/doping tests under the IAAF Procedural Guidelines for Doping Control ("PGDC"). Competitors must declare medication(s) being used when signing a doping control form. Any athlete using a prohibited substance in terms of the PGDC must apply for an exemption to the WMA Doping and Medical Committee.

If the exemption is refused, the prohibited substance(s) concerned may not be used. Should you be selected for testing and test positive you will face suspension. Please note that no medical certificate(s) will be accepted in substitution for an exemption certificate.

If you are granted an exemption certificate and are selected for drug/doping testing, your exemption certificate must be provided to the Doping Control Centre. Details of prohibited substances and all doping procedures are included in the Guidelines Booklet available from the IAAF, your affiliated IAAF Federation, and the IAAF website.

9. DISCLAIMER

I hereby accept participating in the WMA Championships under the IAAF/WMA rules. Furthermore, I relieve the organizers of any liability for any injury and any loss or damage to myself or to my property that I may sustain in the course of the 2010 WMA World Masters Athletics Championships Stadia. I consent to WMA's right to use for promotional purposes photos taken of me during a regular performance.

10. DRUG TESTING CONSENT

I, the undersigned, being the competitor of the 4th WMA World Athletic Championships in Kamloops, hereby give my consent to the subject to any drug testing requirements at the said Championships.

Wilma Stonehocker -
Operations Manager Kamloops
World Masters Indoor
Championships 2010

101 - 910 McGill Road
Kamloops, BC, Canada V2C 6N6
250.828.3823

DATE

ATHLETE'S SIGNATURE