

**A THROWS AND JUMPS COACH FLORIDA TC MEET**  
**HYDROGRASS THROWS CENTER 1551 GLOBAL COURT SARASOTA FL**



SATURDAY, 14 JUNE 2025 – 9:00 A.M.

**OFFICIAL ENTRY FORM**

*Please Print:*

**Name:** \_\_\_\_\_  
First MI Last

**Birth Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_ **Age:** \_\_\_\_\_ **Gender:** ☐ Female ☐ Male  
Month / Day / Year

**Address:** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Daytime Phone:** (\_\_\_\_) \_\_\_\_\_ **Evening Phone:** (\_\_\_\_) \_\_\_\_\_

**Email:** \_\_\_\_\_ **Team:** \_\_\_\_\_

**LIABILITY WAIVER:** I, \_\_\_\_\_ (please print name) desire to participate in one or more of the T & J CF TC events. I realize that Participation in these races carries with it certain risk, and I fully assume any and all risks for my participation. Therefore, I, for myself, executors, administrators, heirs, next of kin, successors and assigns, waive and release anyone associated or affiliated with this event, and T & J CF TC (The Releases) from any and all claims, potential claims, damages, court costs and attorney's fees that may arise from my participation in the event. Furthermore, I agree to indemnify and hold harmless the Releasees for any damages from any such claims or damages due to loss or destruction of my personal property while at the event site or property. I further grant all sponsors the right to photograph and/or videotape me and further to use my name, face likeness, voice and appearance in connection with exhibitions, publicity, advertising and promotional materials without reservation or limitation. I further agree I will not seek remuneration for such photos and publicity. All sponsors are, however, under no obligation to exercise said rights herein granted.

\_\_\_\_\_  
**Signature (Parent or Legal Guardian if under 18 years of age)**

\_\_\_\_\_  
**Date**

**PLEASE NOTE PRICE CHANGE**

**On-Site Registration:** \$30 for first event \$35 ALL EVENTS  
**\$10 ON DAY LATE REGISTRATION FEE**

**Open Events (All Events Mixed)**

_____ Best _____	_____ Best _____
_____ Best _____	_____ Best _____
_____ Best _____	_____ Best _____
_____ Best _____	_____ Best _____

For more information, please contact  
**Meet Director – Andy Vince**  
[andyvince@throwscoachflorida.com](mailto:andyvince@throwscoachflorida.com)  
407 924 6583  
Or visit  
[throwscoachflorida.com](http://throwscoachflorida.com)

**EVENTS:** SHOT, DISCUS, HAMMER, WEIGHT THROW, SUPER WEIGHT, JAVELIN

<b>Method of Payment:</b>	Make check or money order payable to Throws Coach Florida , Paymment can also be Zelle (4079246583) or Venmo (Throws Coach Florida
<b>(NO REFUNDS)</b>	Throws Coach Florida, 24 Pebble Rock Drive VENICE Florida 34293 (Pay on day, Check, Zelle, Venmo, Cash
THROWS COACH FLORIDA ATHLETES CAN PASS/Email COMPLETED FORM WITH ENTRY TO ANDY VINCE (MEET DIRECTOR) <b>MUST CONTACT ME BY THURSDAY TO INFORM ME THAT THEY PLAN TO ATTEND</b>	

**Amount Enclosed:** \_\_\_\_\_