

REGISTRATION APPLICATION
B.P.O. ELKS
"SOCCER SHOOT"®
GOAL SHOOTING CONTEST

Boy ☐

For boys and girls up to age 15

Girl ☐

APPLICANT CAN PARTICIPATE IN ONE LODGE CONTEST ONLY
(PLEASE FILL OUT IN DETAIL)

DATE OF BIRTH _____
(Month) (Day) (Year)

Please enter correct age you were on

JANUARY 1, _____

(Fill in appropriate year)

AGE: _____

APPLICANT'S NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

Home Phone

Mom Work

Dad Work

Mom Cell

Dad Cell

NAME OF APPLICANTS	PARENTS	_____
	or	Mother
	GUARDIANS	_____
		Father

ELKS LODGE _____ NO. _____ DATE _____

REQUEST AND CONDITIONS FOR REGISTRATION

The undersigned, parent/guardian of the above named applicant, hereby requests applicant's registration in the B.P.O. Elks "Soccer Shoot"® GOAL SHOOTING CONTEST and represents the information set forth in this Application is correct. In consideration of such registration and the right of the applicant to participate in the competition, the undersigned does hereby acknowledge and agree that such participation will be solely at the risk of the applicant and the undersigned and without liability to the Benevolent and Protective Order of Elks of the United States of America, its State Associations, its Local Lodges and the officers and members of them (hereinafter collectively referred to as "BPOE"). The undersigned, for himself, his personal representatives and succors, does hereby release and forever discharge BPOE from any and all claims, demands, liabilities, obligations, damages, costs, expenses, loss of service, actions and causes of action including each and every right of payment for damages said undersigned may now or hereafter have against BPOE arising out of any act or occurrence incident to the applicant's said participation and/or the engagement of the undersigned in connection therewith. The undersigned hereby consents and authorizes BPOE to use and reproduce applicant's name and/or likeness and to circulate the same for any and all purposes reasonably related to the conduct and promotion of the said competition, and the undersigned does hereby agree to indemnify and hold BPOE harmless from any and all claims, loss or damage to the BPOE resulting from or related to applicant's said participation. I have read, understood, and followed the rules of the "Soccer Shoot" contest.

(Signature of applicant)

Signature of Parent (Mother)

OR (Father)

NOTE: ALL entrants are requested to contact their school principal or coach to determine if any restrictions or eligibility requirements exist in their state. Signatures verify information supplied on this card is correct.
(Over)

**THIS MUST BE FILLED OUT BY THE RESPECTIVE DESIGNATED
PEOPLE AS SHOWN BELOW. PLEASE PRINT.**

EXALTED RULER

Name _____
Address _____
City _____ State _____ Zip _____
Telephone (Area) _____

LOCAL LODGE DIRECTOR

Name _____
Address _____
City _____ State _____ Zip _____
Telephone (Area) _____ SCORE _____
Document checked by _____ Date _____ Lodge _____
Age verified by _____ Date _____

DISTRICT DIRECTOR

Name _____
Address _____
City _____ State _____ Zip _____
Telephone (Area) _____ SCORE _____

STATE DIRECTOR

Name _____
Address _____
City _____ State _____ Zip _____
Telephone (Area) _____ SCORE _____

AREA/REGIONAL DIRECTOR

Name _____
Address _____
City _____ State _____ Zip _____
Telephone (Area) _____ SCORE _____