

Midwest Distance Gala Registration Form

Name:

Address:

City:

State:

Zip:

Phone:

Email:

Date of Birth:

Gender:

Year in School:

USATF #:

(Can be filled out at packet pick-up day of event, but must be a member before then
Membership information can be found at www.usatf.org)

High School Name:

Coaches Name:

Coaches Email:

Coaches Phone:

Event:

(List more than one if necessary)

Seed Time: