

USFA LOUISIANA DIVISION

PRESENTS THE

JUNIOR OLYMPIC QUALIFIERS

SATURDAY, DECEMBER 3, 2005

AT SOUTHSIDE BAPTIST CHURCH, BATON ROUGE

<u>EVENT:</u>	<u>CLOSE OF REGISTRATION:</u>
JUNIOR MEN'S FOIL	9:00 AM
JUNIOR WOMEN'S EPEE	9:00 AM
CADET WOMEN'S SABER	9:00 AM
CADET WOMEN'S FOIL	11:00 AM
CADET MEN'S EPEE	11:00 AM
JUNIOR MEN'S SABER	11:00 AM
CADET MEN'S FOIL	1:00 PM
JUNIOR WOMEN'S SABER	1:00 PM
CADET WOMEN'S EPEE	1:00 PM
JUNIOR WOMEN'S FOIL	2:30 PM
JUNIOR MEN'S EPEE	2:30 PM
CADET MEN'S SABER	2:30 PM

USFA MEMBERSHIP REQUIRED AND AVAILABLE – USFA RULES APPLY,
INCLUDING ALL FENCING ATTIRE REQUIREMENTS

BIRTH YEAR RESTRICTIONS APPLY:

JUNIOR (U20): 1986 – 1992

CADET (U17): 1989 – 1992

PLEASE PRE-REGISTER AT WWW.ASKFRED.NET

ENTRY FEES: \$15 FIRST EVENT; \$10 EACH ADDITIONAL EVENT

Info: john_poirot@lafayettefencing.com or cheryl_francez@lafayettefencing.com

or call 337-267-1414

Directions to venue – SOUTHSIDE BAPTIST CHURCH: Take I-10 to College Drive. Turn South on College Dr. and cross Perkins Road. College Dr. becomes Lee Dr. Go 5 blocks (you will see the church on the left) and turn left on Sweetbriar. Park behind the church and enter through the door nearest Sweetbriar.

Checks should be made out to "Louisiana Division. Pre-registration on www.AskFred.net is encouraged, but not required.

Participants must be USFA members and members of the Louisiana Division. *Proof of membership is required - no exceptions!* Fencers must show USFA Membership card or an e-mail or FAX from USFA showing confirmation of current membership in this Division or a new membership form and payment will be required (membership forms for minors require the signature of a parent or legal guardian, the coach may not sign).

Waiver and Consent for Medical Treatment is required of each participant and must be signed by a parent or legal guardian if the participant is a minor.

For each age/gender category, the Louisiana Division is entitled to send to the Junior Olympic Championships competitors equal to 30% of entries (rounded up) with a minimum of 2 per event. Example: 1 entry=1 qualifier; 2-6 entries=2 qualifiers; 7-10 entries=3 qualifiers

Events are separated by age category and gender. If there are two entries or less in an event, the event need not be fenced.

Junior Olympic Championships will be held February 17 - 20, 2006 in Hartford, Connecticut. Deadline for entries is January 19th, 2006.

Entry Form - Louisiana Division Junior Olympic Qualifiers

December 3, 2005 at Southside Baptist Church in Baton Rouge, LA

You may complete this form and bring it to the tournament, or you may register on www.askfred.net. **YOU MUST BRING THE COMPLETED WAIVERS WITH YOU, REGARDLESS OF YOUR REGISTRATION METHOD.**

Name: _____

DOB: ___/___/___ Male _____ Female _____

Address: _____

City: _____ State: _____ Zip: _____

Phone Number: _____ Email: _____

Club: _____ USFA Member # _____

Event & Rating:

CADET	JUNIOR
Men's Foil _____	Men's Foil _____
Women's Foil _____	Women's Foil _____
Men's Epee _____	Men's Epee _____
Women's Epee _____	Women's Epee _____
Men's Saber _____	Men's Saber _____
Women's Saber _____	Women's Saber _____

Cost: \$15/\$10 additional event Payment- CHECK CASH Total Enclosed: _____

Please make checks payable to: **Louisiana Division USFA** Payment rcvd by: _____

WAIVER: I hereby waive and release all rights and claims for damages I may have against the USFA, Louisiana Division, Southside Baptist Church, Baton Rouge Fencing Club, Lafayette Fencing Club, L.L.C., the officials, managers and other participants from any and all liabilities arising from illness, losses, injuries or damages I may suffer as a result of participating in this event. I attest and verify that I am physically fit and have sufficiently trained for this competition. I further grant full permission to any and all foregoing to use photographs, videotapes, or any other recording of this event for any purpose.

Signature (if under 18, parent or guardian)

_____ **Date** _____

CONSENT FOR MEDICAL TREATMENT: I understand and appreciate that participation in the sport of fencing carries a risk of serious injury, including permanent paralysis or death. I give consent to representatives of the Louisiana Division to obtain medical care from physicians, clinics or hospitals for any illness that could arise during this competition.

Name of person to contact in an emergency

_____ **Phone** _____

Signature (if under 18, parent or guardian)

_____ **Date** _____