

Name: \_\_\_\_\_



### TEAM REGISTRATION CHECKLIST

Parent		Rancho Belago Elites Representative	
<input type="checkbox"/> Membership Application		<input type="checkbox"/> Membership Application	
<input type="checkbox"/> RBE Liability Waiver		<input type="checkbox"/> RBE Liability Waiver	
<input type="checkbox"/> Refund Policy		<input type="checkbox"/> Refund Policy	
<input type="checkbox"/> Athlete Code of Conduct		<input type="checkbox"/> Athlete Code of Conduct	
<input type="checkbox"/> Parent Code of Conduct		<input type="checkbox"/> Parent Code of Conduct	
<input type="checkbox"/> Emergency Contact		<input type="checkbox"/> Emergency Contact	
<input type="checkbox"/> Uniform Size		<input type="checkbox"/> Uniform Size	
<input type="checkbox"/> Athlete Progression Report Info		<input type="checkbox"/> Athlete Progression Report Info	
<input type="checkbox"/> Parent Media Release Form		<input type="checkbox"/> Parent Media Release Form	
<input type="checkbox"/> Acknowledgement Form		<input type="checkbox"/> Acknowledgement Form	
<input type="checkbox"/> Club Transfer Request Email Notification		<input type="checkbox"/> Club Transfer Request Email Notification	
<input type="checkbox"/> Copy of Birth Certificate		<input type="checkbox"/> Copy of Birth Certificate	
<input type="checkbox"/> Athlete Success/Goal Plan		<input type="checkbox"/> Athlete Success/Goal Plan	
<input type="checkbox"/> Payment		<input type="checkbox"/> Payment	
<input type="checkbox"/> <b>(RBE Staff ) AAU / USATF Membership Application Completed</b>			
Amount Paid	Balance Due	Receipt #	RBE Representative
1.			
2.			
3.			

Paid by:       Cash                       ATM/Debit: \_\_\_\_\_       Other: \_\_\_\_\_

Collected by: \_\_\_\_\_                      Date: \_\_\_\_\_

Recorded/Checked by: \_\_\_\_\_                      Date: \_\_\_\_\_