



YOUTH NATIONAL INDOOR CHANGE FORM

PG PB BG BB MG MB YG YB IG IB YW YM
 One Division/One Sex per form See back of this form for age division events

>>> RELAYS <<<<
 4X200 - Yes No # of Teams _____
 4X400 - Yes No # of Teams _____
 4X800 - Yes No # of Teams _____

USATF Illinois Club _____ Received _____ Entered _____
 Date Submitted _____ # _____ Club Coach _____

**See OVER for Relay Team
Information and Instructions**

Phone _____ Best time to Call _____
 Day _____ / _____
 Nite _____ / _____

PHOTOCOPY
 as needed

Change Form: All athlete additions and changes must be submitted on this form. Athletes must be on the same line as originally submitted. New athletes must be on lines not previously used, with an X in the New-Athlete box.
 Original Event Scratched Event New Event

	• Print or Type Names •			USATF Membership Number	Year of Birth	Events										Bib #							
	First	Last	New			55	200	400	800	1500	3000	55H	200H	1500 RW	3000 RW		4x2	4x4	4x8	LJ	TJ	SP	HJ
1			<input type="checkbox"/>																				
2			<input type="checkbox"/>																				
3			<input type="checkbox"/>																				
4			<input type="checkbox"/>																				
5			<input type="checkbox"/>																				
6			<input type="checkbox"/>																				
7			<input type="checkbox"/>																				
8			<input type="checkbox"/>																				
9			<input type="checkbox"/>																				
10			<input type="checkbox"/>																				
11			<input type="checkbox"/>																				
12			<input type="checkbox"/>																				
13			<input type="checkbox"/>																				
14			<input type="checkbox"/>																				
15			<input type="checkbox"/>																				
16			<input type="checkbox"/>																				
17			<input type="checkbox"/>																				
18			<input type="checkbox"/>																				
19			<input type="checkbox"/>																				
20			<input type="checkbox"/>																				

LATE ENTRIES: Athlete scratches, adds and new athlete entries must be submitted on an official **CHANGE FORM** via mail or Fax.
 Absolutely no telephone adds or changes

Athletes Waiver Authorization: My signature, below, attests to the fact that I have received authority from the parents/guardians of the above named athletes to sign the athletes waiver, which I and the athletes' parents/guardians have read and do understand, **OVER**

Club Coach/Officer _____

Date _____

See back of this form for age division events.

