## 2001 USFA Summer National Championships July 3-11, 2001 - Sacramento, California INDIVIDUAL ENTRY FORM ENT

PLEASE TYPE OR PRINT ALL INFORMATION

Ships ENTRY
DEADLINE:
MAY 23, 2001
ENTRIES RECEIVED AFTER
THIS DATE WILL BE REJECTED!

You MUST follow procedures on waiver page for acknowledgement of receipt of entry!

Member #:	Birthdate		
Last name	First name	_ Initial	
Mailing address Check box if new address			
city	state zip	)	
Phone	Fax		
US Citizen? yes no Permanent Resident #  You must be eligible to represent the U.S internationally by the entry deadline to compete. See Eligibility Rules on page 7.  Classification Class/Year (e.g., C98): Method of Pa	USFA Competition Club School Division Section Foil Epee Saber  yment (Fees must be paid with entry)		
Check or Money Order Enclosed payable to  Note: \$20 charge for returned checks	USFA. Credit Card: Visa Mastercard Ame	ex Discover	
·			
Cardholder	Signature		
Mail or Fax to: USFA Entries One Olympic Plaza Colorado Springs, CO 80909 FAX: 719-632-5737	<ol> <li># (from p. 6) x \$30 = Event Fee</li> <li>Non-refundable Registration Fee</li> <li>Total Amount Due (Add lines 1 + 2)</li> </ol>	\$ \$40.00 \$	

On the next page is the list of individual events by day. Please specify each event you are entering and your qualifying path. FENCERS MAY ONLY ENTER ONE INDIVIDUAL EVENT PER DAY. TEAM ENTRY FORM IS A SEPARATE ENTRY FORM.

<sup>\*</sup>Individuals fencing Team only must complete this page, waiver page & pay \$40 Registration Fee.

## **Entry for 2001 Summer National Championships Individual Competitions**

In the **"Enter"** column, please mark an **"X"** for each competition you wish to enter. Indicate the **"Qual. Path"** as: D=Division, S=Section, A=Automatic or P=Petition. Transfer the **"Total Number Events Entered"** to the first page to compute the total of **"Event Fee"** due. *Accurate completion of this form will avoid delays in processing.* 

## Fencers can enter only one individual competition and one team competition in one day.

Competition	Enter	Qual. Path	Competition	Enter	Qual. Path	Competition	Enter	Qual. Path
Tuesday, July 3		Saturday, July 7		Tuesday, July 10				
Div. I M. Foil			Div. I M. Epee			Div. I-A M. Foil		
Div. I W. Epee			U-19 W. Foil			Div. I-A M. Sabre		
Div. III W. Foil			Youth 14 W. Epee			Div. I-A W. Epee		
Div. III M. Epee			Youth 14 M. Sabre			Div. II W. Sabre		
U-19 M. Sabre			Youth 12 W. Sabre			Youth 12 M. Epee		
U-16 W. Sabre			Youth 10 W. Foil			Youth 10 M. Sabre		
Veteran W. Foil			Youth 10 M. Foil			Youth 10 W. Epee		
Veteran M. Epee			Sunday, July 8		Wednesday, July 11			
Wedneso	lay, Ju	ly 4	Div. I W. Foil			U-16 M. Epee		
Div. II M. Epee			Div. II M. Foil			U-16 W. Foil		
Div. II W. Foil			Div. III M. Sabre					
U-19 W. Sabre			Div. III W. Epee					
Veteran M. Sabre			Div. III W. Sabre					
Veteran W. Epee			U-16 M. Sabre			A Championships individual competition		
Thursday, July 5		Youth 14 M. Epee			must have at least 6 fencers entered for			
Div. I M. Saber			Youth 14 W. Foil			the competition to be	held.	
Div. I-A M. Epee			Youth 12 M. Foil			A Team competition	must h	ave at least
Div. I-A W. Foil			Youth 10 W. Sabre			6 teams entered for	the con	npetition to
U-16 M. Foil			Monday	, July	9	be held.		
U-16 W. Epee			Div. I-A W. Sabre			An Open competition	(Youth	10 & 12)
Veteran M. Foil			Div. II M. Sabre			must have at least 4	fencers	s entered
Veteran W. Sabre			Div. II W. Epee			for the competition to	be he	ld.
Friday	, July	6	Div. III M. Foil					
Div. I W. Sabre			U-19 M. Epee					
U-19 M. Foil			Youth 14 M. Foil					
U-19 W. Epee			Youth 12 M. Sabre					
Youth 14 W. Sabre			Youth 12 W. Epee			Enter the Total Nur	nber	
Youth 12 W. Foil			Youth 10 M. Epee			of Events Entering		

**COPY TOTAL TO PAGE 1 OF ENTRY FORM** 

## Qualifiers must meet the following age standards: (Fencers must follow appropriate qualifying paths)

**Division I-A:** Must be born 1987 or earlier. **Veteran** events are for those born 1960 or earlier.

Division II: Must be born 1987 or earlier and have "C" classification or lower at the time of qualifying.

Division III: Must be born 1987 or earlier and have "D" classification or lower at the time of qualifying.

U-19: Must be born between 1982-1988 unless on Junior Point Standings as of 4/10/01.

**U-16:** Must be born between 1985-1988 unless on Cadet Point Standings as of 4/10/01.

Y14: Must be born between 1986-1989 unless on Y12 Point Standings as of 5/10/01.

Y12: Must be born between 1988-1991 unless on Y10 Point Standings as of 5/10/01.

**Y10:** Must be born between 1990-1993 (Y12 and Y10 events are open to all fencers who meet age standard)

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	rint Name Birth Date if under 18 years of age						
(for athlete Waiver of Liability: Upon rules of the USFA. I enter this organizers from any liability.	es under the age of a n entering this tournament tournament at my own ris he undersigned certifies t	SIGN EACH OF THE FOLLOWING S' 18, a parent or guardian must also si t under the auspices of the USFA, I agree to abid sk and release the USFA and its sponsors, refer that the birth date of the individual is as stated or e USFA for the 2000-2001 fencing season.	ign) de by the current rees, and tournament				
Fencer's Signature	 Date	Signature of Parent or Guardian for minor	Date				
<b>Drug Testing:</b> I understand that drug testing may be conducted for athletes who compete in this tournament and that detection of the use of banned drugs would be cause for suspension for at least three (3) months and loss of any national points earned for selection towards any USFA team. By registering for this tournament, I am consenting to be subject to drug testing if selected and its penalties if declared positive for a banned substance. If selected, I am aware that failure to comply with the drug test will be cause for the same penalties as for those who are positive for a banned substance. I KNOW THAT I MAY CALL THE USOC DRUG HOTLINE, 800-233-0393, FOR ANY QUESTIONS ABOUT MEDICATIONS AND BANNED SUBSTANCES OR PRACTICES. I realize that there are over-the-counter medications that may contain panned substances and that it is my responsibility to insure that I do not inadvertently take any medications that contain a panned substance.							
Fencer's Signature	Date	Signature of Parent or Guardian for Minor	Date				
the USFA and its representativ	es to obtain medical care	on this date I,e from any licensed physician, hospital or clinic for vities associated with USFA Summer National C					
f said athlete is covered by any	insurance company, please	e complete the following (type or print legibly):					
If said athlete is covered by any Name of Carrier	insurance company, please	Name of Policyholder					
	insurance company, please						

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