

## **Competitor Registration Form**

Please print clearly

## 2023 Iowa Tree Climbing Competition (IATCC)

May 27, 2023 Glenwood Lake Park 104 Lake Drive Glenwood, Iowa 51534

Competitor Name:	
Address:	Phone:
City, State:	Email:
Postal code: Country:	
<ol> <li>Are you a member of Iowa Arborist Association? ☐ Yes ☐</li> <li>Do you currently hold an ISA credential? ☐ Yes ☐ No</li> </ol>	
<ul> <li>3. Have you competed at the Iowa Arborist Association event be a lifyes, how many times have you competed?</li> </ul>	
4. All participants will receive an event shirt. Please provide yo	our shirt size:
□M □L □XL □2XL □3XL	
5. Emergency Contact: Please provide an emergency contact name and phone number for Iowa Arborist Association staff to use in an emergency situation. Iowa Arborist Association staff may provide your emergency contact name and phone number to emergency personnel in the event of a medical emergency.  Emergency Contact Name: Emergency Contact Phone #:	
6. Dietary Considerations: Iowa Arborist Association may provi contracted individuals for catering menu consideration. Plea ☐ NONE ☐ Vegetarian ☐ Vegan ☐ Gluten Free	ase select from the following dietary considerations:
☐ Food Allergy/Intolerance ☐ Other	
7. If you selected "Food Allergy/Intolerance" or "Other", please	e list: :

PL	JBLICITY CONSENT:  I authorize lowa Arborist Association event volunteers, and other lowa Arborist Association contracted individual's permission to take photographs or video of me that may be used and published in either print or electronic media. I understand that lowa Arborist Association posts photography notices stating other individuals so not have permissions to use photos or video in any manner without consent of the lowa Arborist Association or the individual photographed.  □ Agree □ Disagree
	I authorize Iowa Arborist Association to provide event photos that may include my image to commercial entities, such as event sponsor, for use in promoting their participation and support of the event. Any other commercial use of the photos must have written consent of Iowa Arborist Association and the individual photographed.  □ Agree □ Disagree
	I authorize that with or without said photographs, Iowa Arborist Association may publish my name for any lawful purposes such as publicity materials, media releases, social media, and advertising.  ☐ Agree ☐ Disagree
	INSURANCE AND RELEASE INFORMATION: Please read and sign the attached insurance information form and participant release.

Please send all completed forms to: IAA, Attn: Scott Carlson, 24538 170th Ave, Eldridge, IA 52748

Or by email to: <a href="mailto:slcarlson9999@csteldridge.com">slcarlson9999@csteldridge.com</a>

The registration fee may be paid online, or a check may be included with the required forms. Competitors who have not paid at the time of the scheduled event will not be allowed to compete.

Rev. Date: 30-Mar-23