



## Authorization to Register

Fencer's Name [redacted]

Name of Tournament [redacted]

Location of Tournament [redacted]

Dates of Tournament [redacted]

Your child's Coach has determined that your child should fence the following events:

Event:

Date/Check-in Time

[redacted]  
[redacted]  
[redacted]

[redacted]  
[redacted]  
[redacted]

We have blocked rooms at the following hotel at the following rates:

[redacted]

[redacted]

\*\* Please be advised you must make your own hotel reservations. When making the reservation, please tell them you are with Olympia Fencing Academy.

### PLEASE DETACH AND RETURN TO OLYMPIA FENCING ACADEMY

Please indicate those events your child will be fencing:

Event:

Date/Check-in Time

[redacted]  
[redacted]  
[redacted]

[redacted]  
[redacted]  
[redacted]

If your child will not be traveling with a parent, please indicate with whom your child will travel:

[redacted]

I, [redacted] authorize Olympia Fencing Academy to register my child [redacted] in the above listed events. I understand that I will be charged only those fees required to register my child in such events. I understand it is my obligation to secure hotel and travel arrangements for the above event.

Parents signature of minor child [redacted]

Date [redacted]

Please fill out this form and fax it to 314.993.9704 or mail to Olympia Fencing Academy 8664 Olive Blvd., St. Louis, MO 63124. Thank you!