



**18th WORLD MACCABIAH GAMES
ISRAEL
JULY 13 – JULY 23, 2009**



UNITED STATES 18TH WORLD MACCABIAH TEAM
Maccabi USA/Sports for Israel · 1926 Arch Street, 4R, Philadelphia PA 19103
215/561-6900 Fax: 215/561-5470 e-mail: maccabi@maccabiusa.com www.maccabiusa.com

1. Please check and complete one of the following: Date _____

Athlete application: Sport _____
 Open Masters Juniors Youth

Staff Application (If you check here, specify below and complete the extra section titled "Staff Application Addendum.")
For: Coach Assistant Coach Accommodations Manager Trainer Nurse Doctor
If applicable, for which sport? _____ (Please indicate Open, Juniors, Youth, Masters)

2. PERSONAL DATA

Gender: Male Female

Name _____ Title: Mr. Ms. Mrs. Dr. Spouse: _____
Last Name First Name Middle Initial (as it appears on your passport)

Home Address _____
Street City State Zip

Home Phone (_____) _____ Portable (_____) _____ Fax (_____) _____

E-mail _____

Are you a full time student? yes no Preferred mailing address: home school (from: _____ to: _____) business

School Address _____
Street City State Zip

School Phone (_____) _____ Fax (_____) _____ e-mail _____

Occupation _____ Business/Firm Name _____

Business Address _____
Street City State Zip

Business Phone (_____) _____ Fax (_____) _____

Date of Birth _____ Birthplace _____
U.S. Citizen: yes no If yes, passport number _____ expiration date _____

If not, citizen of what country? _____ U.S. Resident Alien: yes no Attach a copy of your Green Card.

Father's Full Name _____ Mother's Full Name _____

Address _____ Address _____
Street Street

City State Zip City State Zip

Home (_____) _____ e-mail _____ Home (_____) _____ e-mail _____

Office (_____) _____ Fax (_____) _____ Office (_____) _____ Fax (_____) _____

3. EDUCATIONAL BACKGROUND

High School (If currently enrolled) _____ Expected Year of Graduation _____

University (Include City) _____ Degree _____ Year of Graduation _____

University (Include City) _____ Degree _____ Year of Graduation _____

University (Include City) _____ Degree _____ Year of Graduation _____

4. JEWISH AFFILIATIONS (This section MUST be completed).

Include you or your family's memberships in synagogues, Jewish Community Centers, Hillel, organizations, etc. Include current or prior affiliations AND their cities. If you or your family have no such affiliations, please indicate by stating "NONE."

Please indicate if you are Shomer Shabbat. yes no Do you observe Kashrut? yes no

5. APPAREL INFORMATION - This will be used for your **official** Team USA and competitive apparel.

Height _____ Weight _____ Waist _____

Circle one (Men's and Women's sizes): **T-shirt** (S M L XL XXL) **Warmup** (XS S M L XL XXL XL Tall)
Polo Shirt (S M L XL XXL) **Shorts size** (S M L XL XXL)

6. SPORTS INFORMATION

Sport Position (i.e. Soccer Goalie) _____

School or Club Affiliation _____

Past Maccabi Experience: Indicate year(s) of Participation in the space to the event and medals in the space below.

Maccabiah _____ Pan Am Maccabi _____ JCC Maccabi Games _____

Maccabi Australia International Games _____ European Maccabi Games _____

Sport _____ Medals _____

Other Medals and/or awards earned (included dates) _____

Recent Performance Results (Official competition only. List dates places.) You may send in additional information.

7. REFERENCES

List THREE members of your Jewish community who have known you at least TWO years. DO NOT INCLUDE RELATIVES.

a. Name _____ Address _____

Home (_____) _____ Office (_____) _____
City _____ State _____ Zip _____

b. Name _____ Address _____

Home (_____) _____ Office (_____) _____
City _____ State _____ Zip _____

c. Name _____ Address _____

Home (_____) _____ Office (_____) _____
City _____ State _____ Zip _____

8. PUBLIC RELATIONS

Please describe how you learned to apply to be a member of the U.S. Maccabiah Team
(from your coach, Sports Chair, website, a newspaper or other publication, JCC Maccabi Games, etc.)

CERTIFICATION Please have your athletic director, coach, or other official of sport confirm your athletic record. I hereby confirm this applicant's athletic record.

Signature of athletic director, coach, or other official of sport Date

Please type name and title of signer. Phone (____) _____ Fax (____) _____

Address _____ Email _____

YACHAD AGREEMENT – shared commitment (For ALL applicants)

I hereby agree that if selected as a member of the 18th U.S. Maccabiah Team, I will participate in the Yachad program to raise funds in support of the U.S. Maccabiah Team and Maccabi USA, as set forth in the cover letter under “Yachad” above. The Yachad program for the U.S. Maccabiah Team requires a shared commitment from all Team members to fund the U.S. Team and to ensure the success of the Games. I understand that failure to fulfill my Yachad Shared Commitment by not raising all of the required funds may result in my removal from the Team. Yachad commitments are non-refundable.

Applicant's Signature Date

Parent's Signature (If applicant is under 18 on date of signing) Date

DECLARATION (For ALL applicants)

I hereby declare that I am of the Jewish faith and if selected will conform to all rules governing the U.S. Maccabiah Team and the 18th World Maccabiah Games. Furthermore, I hereby release Maccabi USA/Sports for Israel to use my name and photograph in all results and publicity material. In filing this application I understand that Maccabi USA/Sports for Israel has the right to reject my application for any reason at any time. Filing this application confers no rights to me and the acceptance of the application is always subject to rejection even after the selection process. I understand that Maccabi USA/Sports for Israel and the U.S. Maccabiah Team have no liability or responsibility to me based upon the application or the selection process which may be used at any given time. Furthermore, for valuable consideration received, I hereby release Maccabi USA/Sports for Israel, its officers, directors, employees, agents, servants and volunteers from any and all liability and claims which may arise from the application or the selection process utilized to appoint members of the U.S. Maccabiah Team, including any and all claims arising out of personal injuries or damages from any cause whatsoever.

I am aware of the security risks which exist in Israel. I understand that Maccabi USA/Sports for Israel has determined that the USA Maccabiah Team will participate in the 18th Maccabiah Games, unless the Games are cancelled.

Applicant's Signature Date

Parent's Signature (If applicant is under 18 on date of signing) Date

APPLICATION FEE (\$40 payment must be submitted with this Signature Page)

Check (payable to Maccabi USA/Sports for Israel) **OR** Credit Card (VISA/Mastercard/Amex)

Card Number: _____ Expiration Date: _____

Name of Card Holder: _____ Signature: _____

MANAGEMENT APPLICATION ADDENDUM

TO BE COMPLETED BY MANAGEMENT APPLICANTS IN ADDITION TO THE APPLICATION FORM.

PLEASE TYPE OR PRINT CLEARLY

NAME _____

Occupation _____ Employer _____

PROFESSIONAL REFERENCES (Please list two)

Name _____ Name _____

Address _____ Address _____
Street Street

City State Zip City State Zip

Home (_____) Office (_____) Home (_____) Office (_____) _____

Fax (_____) Fax (_____) Fax (_____) Fax (_____) _____

e-mail _____ e-mail _____

Accomplishments:

Why do you wish to be a member of the United States Maccabiah Team?

Additional Comments:

