



# 2009 USATF JUNIOR OLYMPIC TRACK & FIELD CHAMPIONSHIPS

## Event Entry & Advancement Form

Please type or print legibly

Last Name \_\_\_\_\_ First \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone ( ) \_\_\_\_\_ Email (opt.) \_\_\_\_\_

Full USATF Club Name \_\_\_\_\_

USATF Club Number \_\_\_\_/\_\_\_\_/\_\_\_\_-\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_

USATF Association \_\_\_\_\_ USATF Region \_\_\_\_\_

2009 USATF Member. No. \_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_/\_\_\_\_ (Required)

**AGE DIVISION**

Sex:  Male  Female

Sub- Bantam (Born 2001 and later)

Bantam (Born 1999 and later)

Midget (Born 1997 – 1998)

Youth (Born 1995 – 1996)

Intermediate (Born 1993 – 1994)

Young M/W (Born 19901– 1992)\*

\*(See Rule 300.1.c - Includes athletes who are still 18 thru August 2, 2008)

Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

**BIRTH DATE VERIFIED\*\***

**June 12-13: Entry Fees: \$6 Individual. Event Association Championships Location: Shawnee Mission South High School**  
**\$24.00 Relay Teams 5800 West 107th Street, Overland Park, KS**

Please list events in which you are going to compete. If Preliminary meets were contested, use time/mark and place. If not, use approximate time/mark for seeding purposes.

	Event	Time/Mark	Place	Event	Time/Mark	Place
1	1) _____	_____	_____	3) _____	_____	_____
	2) _____	_____	_____	4) _____	_____	_____

Combined Events \_\_\_\_\_ Total Pts \_\_\_\_\_ Place \_\_\_\_\_

**July 9-12<sup>th</sup> : Entry Fees: \$7 Individual. Event Regional Championships Location: Wichita State University, Wichita Kansas**  
**\$28.00 Relay Teams Heptathlon/Decathlon: \$20.00, Triathlon/Pentathlon, \$16.00**

Please list events in which you are going to compete: list place and time/mark achieved at the association meet.

	Event	Time/Mark	Place	Event	Time/Mark	Place
2	1) _____	_____	_____	3) _____	_____	_____
	2) _____	_____	_____	4) _____	_____	_____

Combined Events \_\_\_\_\_ Total Pts \_\_\_\_\_ Place \_\_\_\_\_

**July 28 – August 2 National Championships Irwin Belk Track – Greensboro, NC**  
**Entry Fees \$8.00 Indiv. Events, \$32.00 Per Relay, \$24.00 Heptathlon/Decathlon, \$20.00 Triathlon/Pentathlon**

Please list events in which you are going to compete: list place and time/mark achieved at the regional meet.

	Event	Time/Mark	Place	Event	Time/Mark	Place
3	1) _____	_____	_____	3) _____	_____	_____
	2) _____	_____	_____	4) _____	_____	_____

Combined Events \_\_\_\_\_ Total Pts \_\_\_\_\_ Place \_\_\_\_\_

Athlete's Release: I voluntarily agree to participate in the 2009 USA Track & Field Junior Olympic Championships and knowingly assume any and all risks of loss, damage to my person or property, injury (including death), both foreseen and unforeseen, of my attendance at and participation in the 2009 USA Track & Field Junior Olympic Championships, from any cause whatsoever, including the fault or negligence of Releasees (as defined below). I, for myself, my heirs, personal representatives and assigns do hereby release, waive, discharge and covenant not to sue USA Track & Field, Inc., the local USATF Association, the Local Organizing Committee, the Facility and Championship Sponsors, their respective officers, directors, employees, agents and volunteers (collectively "Releasees") from all liability, loss, claims, demands, possible causes of action, court costs, settlement costs and fees, attorneys fees and any other expenses arising from any claim or lawsuit that may arise from any loss, damage or injury (including death) to me or my property resulting from or arising in connection with, or related to, my attendance at or participation in the 2009 USA Track & Field Junior Olympic Championships. In the event that I am injured, I hereby consent to the provision of necessary and appropriate emergency medical treatment.

By entering this competition, I grant USA Track & Field, Inc. a limited license to use my name, likeness, image, voice, video, athletic performance, biographical and other information, in any format whatsoever, and to distribute, broadcast and exhibit these without charge, restriction or liability, but only for the purposes of advertising or promoting the sport of Athletics. In no event, however, will such usage constitute an endorsement of any product or service without my specific written consent.

Athletes who participate in this competition may be subject to drug testing. Visit the competition's Athlete Information page ([www.usatf.org/events/2009/USATFJuniorOlympicTFChampionships](http://www.usatf.org/events/2009/USATFJuniorOlympicTFChampionships)) for more information.

Signature - **ATHLETE**

Signature - **PARENT / GUARDIAN** (Must be signed if athlete is under 18 years of age.)

ADA request: I am requesting an accommodation for a disability as follows: \_\_\_\_\_ (visit [www.usatf.org/about/legal/policies/ADA.asp](http://www.usatf.org/about/legal/policies/ADA.asp) for forms and procedures)  
 \* Please note: All requests for accommodations must be received six weeks prior to the date of competition.

List allergies and current medications: \_\_\_\_\_

**THIS ENTRY FORM MUST BE RETURNED TO THE REGISTRATION AREA BEFORE LEAVING THIS MEET.**

\*\*Proof of Age: Verification Stamp (based on Birth Certificate, Certified Baptismal Record, Passport, Driver's License, or United States Government Identification)