

# 2004 AAU NATIONAL CLUB CHAMPIONSHIPS



## TRACK AND FIELD ATHLETE ENTRY FORM



\*Circle one\*

**Male    Female**

**Please Print**

**COMPLETE ALL AREAS BEFORE SUBMITTING**

First Name:	MI:	Last Name:
Street Address:		
City:	State:	Zip:
Date of Birth:		
Phone Number: (    )	Fax Number: (    )	
AAU Membership Number:	Club Name:	
Email Address:		

### AGE DIVISION (CHECK ONE ONLY)

Athletes year of birth will determine age division.

<input type="checkbox"/> Primary (Born 1996 & after)*	<input type="checkbox"/> Sub Bantam (Born 1995)*	<input type="checkbox"/> Bantam (Born 1994)*
<input type="checkbox"/> Sub Midget (Born 1993)*	<input type="checkbox"/> Midget (Born 1992)*	<input type="checkbox"/> Youth (Born 1990-1991)**
<input type="checkbox"/> Intermediate (Born 1988-1989)**	<input type="checkbox"/> Young Men/Women (1986-1987)**	

\*Athletes in these age divisions are allowed only three (3) events (including relays) Excluding Multi-Events

\*\*Athletes in these age divisions are allowed only four (4) events (including relays) Excluding Multi-Events

### EVENTS

100 M Dash	200 M Dash	400 M Dash	800 M Run
1500 M Run	3000 M Run	1500 M Racewalk	3000 M Racewalk
2000 M Steeplechase (IG, IB-YW, YM Only)	80 M Hurdles (8x30")	100 M Hurdles (10x30" for YG) (10x30" for IB/IG/YW)	110 M Hurdles (10x39" for IB/YM)
200 M Hurdles (5x30" for YB/YG)	400 M Hurdles (10x36" for IB/YM) (10x30" for IG/YW)	Long Jump	Triple Jump
High Jump	Discus	Shot Put	Javelin
Pole Vault	400 M Relay (4x100)	1600 M Relay (4x400)	3200 M Relay (4x800) (MB/MG/YB/YG/IB/IG/YM/YW)
Sprint Medley Relay (IG, IB, YW, YM)			

**NO ADDITIONS OR CHANGES TO THIS FORM MAY BE MADE AFTER SUBMISSION.**

**Please circle your t-shirt size: Youth - S M L Adult - S M L XL XXL XXXL**

Payment by credit card (check one):	
<input type="radio"/> VISA	<input type="radio"/> MASTER CARD
<input type="radio"/> DISCOVER	<input type="radio"/> AMERICAN EXPRESS
Credit Card Number: _____	Expiration Date: _____
Name on Card (print): _____	Signature: _____



**2004 AAU NATIONAL CLUB CHAMPIONSHIPS  
MULTI-EVENT  
ATHLETE ENTRY FORM**



\*Circle one\*

**Male    Female**

**IF COMPETING IN THE MULTI-EVENTS THIS FORM MUST BE COMPLETED**

**Please Print**

**COMPLETE ALL AREAS BEFORE SUBMITTING**

First Name:	MI:	Last Name:
Street Address:		
City:	State:	Zip:
Date of Birth:		
Phone Number: (    )	Fax Number: (    )	
AAU Membership Number:	Club Name:	
Email Address:		

TRIATHLON	PENTATHLON	HEPTATHON	DECATHLON
Sub Bantam (1995 or after)	Sub Midget (1993)	Intermediate (1988-1989)	Intermediate (1988-1989)
Bantam (1994)	Midget (1992)	Young Women (1986-1987)	Young Men (1986-1987)
	Youth (1990-1991)		

**NO ADDITIONS OR CHANGES TO THIS FORM MAY BE MADE AFTER SUBMISSION.**

**Please circle your t-shirt size:    Youth - S   M   L    Adult – S   M   L   XL   XXL   XXXL**

Payment by credit card (check one):	
<input type="radio"/> VISA	<input type="radio"/> MASTER CARD
<input type="radio"/> DISCOVER	<input type="radio"/> AMERICAN EXPRESS
Credit Card Number: _____	Expiration Date: _____
Name on Card (print): _____	Signature: _____



**2004 AAU NATIONAL CLUB CHAMPIONSHIPS  
TRACK AND FIELD  
BOYS' AND GIRLS' RELAY  
TEAM ENTRY FORM**



Circle one

**Male    Female**

**TEAM AND COACH INFORMATION**

<b>2004 AAU CLUB#:</b>	<b>CLUB NAME:</b>	
<b>COACH'S NAME:</b>	<b>EMAIL ADDRESS:</b>	
<b>COACH'S ADDRESS:</b>		
<b>CITY:</b>	<b>STATE:</b>	<b>ZIP:</b>
<b>COACH'S HOME PHONE:</b>	<b>WORK/CELL PHONE:</b>	

**EVENT INFORMATION**

<b>(SEPARATE ENTRY FORM FOR EACH RELAY) EVENT: CIRCLE ONE</b>	<b>AGE DIVISION: CIRCLE ONE</b>
<p align="center">4x100m    4x400m    4x800m</p> <p align="center">Sprint Medley (200-200-400-800)</p>	<p align="center">BANTAM            MIDGET            YOUTH</p> <p align="center">INTERMEDIATE            YOUNG WOMEN/MEN</p>

**NO ADDITIONS OR CHANGES TO THIS FORM MAY BE MADE AFTER SUBMISSION.**

**RELAY TEAM ROSTER**

<b>NAME (PLEASE PRINT)</b>	<b>YEAR OF BIRTH</b>	<b>NAME (PLEASE PRINT)</b>	<b>YEAR OF BIRTH</b>
<b>1.</b>		<b>5.</b>	
<b>2.</b>		<b>6.</b>	
<b>3.</b>		<b>7.</b>	
<b>4.</b>		<b>8.</b>	

Payment by credit card (check one): <input type="radio"/> VISA <input type="radio"/> MASTER CARD <input type="radio"/> DISCOVER <input type="radio"/> AMERICAN EXPRESS	
Credit Card Number: _____	Expiration Date: _____
Name on Card (print): _____	Signature: _____



**2004 AAU NATIONAL CLUB CHAMPIONSHIPS  
CLUB/TEAM ROSTER FORM**



**Club Name** \_\_\_\_\_

<b>ATHLETE NAME</b>	<b>GENDER</b>	<b>AAU CARD NUMBER</b>
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**MAKE ADDITIONAL COPIES OF THIS FORM AS NEEDED**



## 2004 AAU NATIONAL CLUB CHAMPIONSHIPS



### INSTRUCTIONS

- 1.) Read all entry information and instructions before completing this document.
- 2.) Complete all areas of each necessary form and provide all requested information. **Failure to complete all areas of these forms will delay the processing of your entry.**
- 3.) **All entry money must accompany these documents when submitted to the AAU National Office.**
- 4.) Entry deadline is Wednesday, June 23, 2004. **Late entries will not be accepted!**

**Entry Deadline:** Received by Wednesday, June 23, 2004.  
**Guaranteed overnight delivery is highly recommended to meet deadline date!** Please pay close attention to the *Submission Instructions* below.

**Send all items completed:**

- 1) Individual Athlete Entry Form/Relay Entry Form/Multi-Event Entry Form Team Athlete Entry Form/Club/Team Entry Form
- 2) Correct Entry Fee of \$30.00 per athlete
- 3) Signed Athlete Waiver/Release Form(s) for each athlete
- 4) Club/Team Entry Form

**Entry Fee:** \$30.00 per athlete

**All fees are non-refundable.** No personal checks will be accepted. Please send credit cards, money orders or certified checks **ONLY – (NO CASH)**– made payable to: **AAU National Club Championships**

**Submission:** **US Mail**  
AAU National Headquarters  
Club Championships Registration  
P.O. Box 22409  
Lake Buena Vista, FL 32830

**Overnight Delivery**  
AAU National Headquarters  
Club Championships Registration  
1910 Hotel Plaza Blvd.  
Lake Buena Vista, FL 32830  
407-934-7200

**ATHLETE WAIVER/RELEASE FORM ("AGREEMENT")**

IN CONSIDERATION of my/the minor's participation in any way in any Amateur Athletic Union of the U.S., Inc., activity ("**ACTIVITY**") I, for myself, the minor, my personal representatives, assigns, heirs, and next of kin: **1. ACKNOWLEDGE**, agree, and represent that I understand the nature of the Activity and that I am/ the minor is qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I/ the minor will immediately discontinue further participation in the Activity. **2. FULLY UNDERSTAND** that: (a) **ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS")**; (b) these Risks and dangers may be caused by my own/ the minor's actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or **THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW**; (c) there may be **OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES** either not known to me or not readily foreseeable at this time; and I **FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES** I incur/ the minor incurs as a result of my/the minor's participation in the Activity. **3. HEREBY RELEASE, AND FOREVER DISCHARGE, AND COVENANT NOT TO SUE** the Amateur Athletic Union of the U.S. Inc. ("**AAU**"), Walt Disney World Hospitality & Recreation Corporation, Walt Disney World Co., Disney Sports Attractions (collectively, "**DISNEY**"), their parent, related, affiliated, and subsidiary companies, as well as the officers, directors, agents, employees, representatives, successors and assigns of each of the foregoing entities, and the AAU's Associations, clubs, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by the AAU, including, but not limited to, South Lake Hospital, Inc., (each considered one of the **RELEASEES** herein) **FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY/THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE ACTION, INACTION OR NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING, BUT NOT LIMITED TO NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES**; AND I **FURTHER AGREE** that if, despite this **RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT** I, or anyone on my/the minor's behalf, makes a claim against any of the Releases, I **WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES** from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. This Agreement shall be governed by the laws of the State of Florida, and any legal action relating to or arising out of this Agreement shall be commenced exclusively in the Circuit Court of the Ninth Judicial Circuit in and for Orange County, Florida (or if such Circuit Court shall not have jurisdiction over the subject matter thereof, then to such other court sitting in said county having subject matter jurisdiction).

**Agreement to Participate**

I, or we, grant to the Directors, Assistants, or assigned chaperons of this event to act as guardians/spokesman in granting permission for emergency treatment/hospitalization (including anesthesia) if necessary for the minor en route to or from or at the site of AAU event or hospital or other medical facility. I understand that should a health emergency arise, such parties will attempt to notify me, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized. I hereby authorize the AAU and/or Disney to allow the reproduction, dissemination, and/or publication of my / the minor's name and/or likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording. This is to be done in conjunction with my/the minor's participation in this AAU event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my/the minor's participation in this event, nor will I/the minor receive any payment for the possible commercial use of my/the minor's name or likeness. **INSURANCE:** AAU membership provides excess medical insurance for any member athlete participating in an AAU-sanctioned practice or event. If such athlete has other medical coverage, theirs will be applied first, followed by AAU insurance. I **HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.**

**PRINTED NAME OF PARTICIPANT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**PARTICIPANT'S SIGNATURE** (only if age 18 or over): \_\_\_\_\_ **DATE:** \_\_\_\_\_

**TEAM NAME:** \_\_\_\_\_

**MINOR RELEASE:** AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY--AS IS, WITHOUT MODIFICATION OR ACCOMMODATION. I HEREBY **RELEASE, FOREVER DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE ACTION, INACTION AND/OR NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION AND/OR ARBITRATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGES, OR COSTS ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.**

**PRINTED NAME OF PARENT/GUARDIAN:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ (Street) \_\_\_\_\_ (City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip)

**PHONE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PARENT/GUARDIAN SIGNATURE** (only if participant is under the age of 18): \_\_\_\_\_