



2004 AAU Junior Olympic Games Track and Field INDIVIDUAL ATHLETE ENTRY FORM



INSTRUCTIONS

- 1) Read all entry information and instructions before completing this document.
- 2) Entry information for your completion is on the reverse side of this form.
- 3) Complete all areas on the reverse side of this form and provide all requested information.
Failure to complete all areas of this form will delay the processing of your entry.
- 4) NOTE: **Both** copies of each entry form (white and yellow) **must** be returned to the address shown below.

ENTRY DEADLINE: Received by Friday, July 16, 2004. **Late entries will not be accepted!**
Guaranteed overnight delivery is highly recommended to meet deadline date!
Please pay close attention to the submission instructions below.

- SEND:**
- 1) Track and Field Entry Form with all items completed,
 - 2) Correct entry fee of \$35.00
 - 3) Signed Athlete Waiver/Release Form, and
 - 4) Forms must be sent with the Club/Team Roster Form if competing as part of a club.

ENTRY FEE: \$35.00 per athlete.

All fees are non-refundable. No personal checks accepted.

Please send money orders or certified checks ONLY made payable to:
2004 AAU Junior Olympic Games.

Mailing Address:

2004 AAU Junior Olympic Games
Attn: Track
525 SW 5th Street, Suite C
Des Moines, IA 50309-4501

White copy and yellow copy of this form MUST be returned to the address shown above.



You have approval to make additional copies of this form as needed.

Thank you for supporting the AAU National Sponsors.

2004 AAU Junior Olympic Games Track and Field

INDIVIDUAL ATHLETE ENTRY FORM

Male Female
(Check One)

Region # _____

COMPLETE ALL AREAS BEFORE SUBMITTING

Athlete's First Name MI Last Name

Street Address (Apartment/Building/Unit)

City State Zip Code Home Phone Number including Area Code

Date of Birth (Mo/Day/Year) Age AAU Membership Number (Include ALL Letters and Digits)

Club Name E-mail Address _____

Hotel (Housing) in Des Moines, IA: _____

AGE DIVISION (fill in ONLY one box)

ATHLETES YEAR OF BIRTH WILL DETERMINE AGE DIVISION.

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

* Athletes who are still eighteen (18) years of age through the final day of the National Meet shall be eligible to compete.

EVENTS (Qualified thru Regional ONLY!)

- | | | |
|--|--|---|
| <input type="checkbox"/> 100 M Dash | <input type="checkbox"/> 80 M Hurdles (8x30") | <input type="checkbox"/> Discus |
| <input type="checkbox"/> 200 M Dash | <input type="checkbox"/> 100 M Hurdles (10x33") (10x30") | <input type="checkbox"/> Shot Put |
| <input type="checkbox"/> 400 M Dash | <input type="checkbox"/> 110 M Hurdles (10x39") | <input type="checkbox"/> Javelin |
| <input type="checkbox"/> 800 M Run | <input type="checkbox"/> 200 M Hurdles (5x30") | <input type="checkbox"/> Pole Vault |
| <input type="checkbox"/> 1500 M Run | <input type="checkbox"/> 400 M Hurdles (10x36" B) (10x30" G) | <input type="checkbox"/> 400 M Relay (4x100) |
| <input type="checkbox"/> 3000 M Run | <input type="checkbox"/> Long Jump | <input type="checkbox"/> 1600 M Relay (4x400) |
| <input type="checkbox"/> 1500 M Racewalk | <input type="checkbox"/> Triple Jump | <input type="checkbox"/> 3200 M Relay (4x800) |
| <input type="checkbox"/> 3000 M Racewalk | <input type="checkbox"/> High Jump | (M-Y-I-YW/M Only!) |
| <input type="checkbox"/> 2000 M Steeplechase (IG-IB-YW-YM Only!) | | |

SEE FIRST PAGE FOR ALL INSTRUCTIONS

**BE SURE TO RETURN BOTH COPIES TO THE ADDRESS ON THE BACK OF THIS FORM
LATE ENTRIES WILL NOT BE ACCEPTED BEYOND THE DEADLINE DATE**

FOR OFFICIAL USE ONLY

ENTRY FORM COMPLETED CORRECT FEE PAID ATHLETE'S WAIVER/RELEASE FORM

You have approval to make additional copies of this form as needed.



2004 AAU Junior Olympic Games Track and Field/Multi Events COACH'S ENTRY FORM



INSTRUCTIONS

- 1) Read all entry information and instructions before completing this document.
- 2) Complete **all** and provide **all** requested information.
Failure to complete all areas of this form will delay the processing of your entry.
- 3) This entry form **must** be returned to the address shown below.

COMPLETE ALL AREAS BEFORE SUBMITTING

First Name	MI	Last Name	
Street Address (Apartment/Building/Unit)			
City	State	Zip Code	Home Phone Number including Area Code
Date of Birth (Mo/Day/Year)	Age	AAU Membership Number (Include ALL Letters and Digits)	E-mail Address (please include)
Club Name or Individual You Will Coach			

Reminder: If you do not include this Coach's Entry Form along with the Club/Team Roster Form and all Individual Athlete Entry Forms (including all Relay Entry Forms), you will be required to pay the standard coaches entry fee.

ENTRY DEADLINE: Received by Friday, July 16, 2004. **Late entries will not be accepted!**
Guaranteed overnight delivery is highly recommended to meet deadline date!

- SEND:**
- 1) Coach's Entry Form with all fields completed, and
 - 2) Correct entry fee of \$35.00. Only send entry fee if:
 - a) Submitting this form without the Club/Team Roster Form
 - b) Your club has less than nine (9) athletes, or
 - c) Coaching individual unattached athletes.

SUBMISSION INSTRUCTIONS: Please send money orders or certified checks **ONLY** made payable to:
2004 AAU Junior Olympic Games. NO PERSONAL CHECKS ACCEPTED.

Mailing Address: **2004 AAU Junior Olympic Games**
525 SW 5th Street, Suite C
Des Moines, IA 50309-4501

- NOTE:** All coaches must be AAU members and present a current 2004 AAU Membership Card at Check-in at the Veterans Auditorium in order to receive coach's credentials. AAU Cards may be purchased at Check-in for \$14.00. The \$35.00 entry fee for non-club coaches and those with less than nine (9) member athletes does **NOT** include AAU membership. A coach's credential provides each registered coach with the following:
- | | |
|-------------------------------------|--------------------------------------|
| 1) Access to all competition venues | 2) Celebration of Athletes Admission |
| 2) Participant T-shirt | 4) Coaches Gift Item and Goody Bag |

Check here if this form is being submitted with the Club/Team Roster Form and Individual Athlete Entries from your club.

LATE ATHLETE ENTRIES WILL NOT BE ACCEPTED BEYOND THE DEADLINE DATE

FOR OFFICIAL USE ONLY

COACH'S ENTRY FORM COMPLETED CORRECT ENTRY FEE PAID NO ENTRY FEE REQUIRED

You have approval to make additional copies of this form as needed.



2004 AAU Junior Olympic Games Multi-Events



INDIVIDUAL ATHLETE ENTRY FORM

INSTRUCTIONS

- 1) Read all entry information and instructions before completing this document.
- 2) Complete **all** areas and **all** requested information.
Failure to complete all areas of this form will delay the processing of your entry.
- 3) Return this form to the address shown below.
- 4) Be sure to sign and date the Athlete Waiver/Release Form.

ENTRY DEADLINE: Received by Friday, July 16, 2004. **Late entries will not be accepted!**
Guaranteed overnight delivery is highly recommended to meet deadline date!
Please pay close attention to the submission instructions below.

SEND:

- 1) Multi-Events Individual Athlete Entry Form signed and completed (both copies: white and yellow),
- 2) Correct entry fee of \$35.00, and
- 3) Signed Athlete Waiver/Release Form.

ENTRY FEE: \$35.00 per athlete. All fee are non-refundable. **No personal checks accepted.**

SUBMISSION INSTRUCTIONS: If competing in both multi-events and Track & Field, two separate entry fees of \$35.00 each must be submitted. Please send money orders or certified checks **ONLY** made payable to:
2004 AAU Junior Olympic Games.

Mailing Address: **2004 AAU Junior Olympic Games**

Attn: Track/Multi-Events
 525 SW 5th Street, Suite C
 Des Moines, IA 50309-4501

Region # _____

Male Female
 (Check One)

COMPLETE ALL AREAS BEFORE SUBMITTING

First Name MI Last Name

Street Address (Apartment/Building/Unit)

City State Zip Code Home Phone Number including Area Code

Date of Birth (Mo/Day/Year) Age AAU Membership Number (Include ALL Letters and Digits) E-mail Address:

Team/Club Name: _____

Hotel (Housing) in Des Moines, IA: _____

<p>TRIATHLON</p> <p><input type="checkbox"/> Sub Bantam (Born 1995 or after)</p> <p><input type="checkbox"/> Bantam (Born 1994)</p>	<p>PENTATHLON</p> <p><input type="checkbox"/> Sub Midget (Born 1993)</p> <p><input type="checkbox"/> Midget (Born 1992)</p> <p><input type="checkbox"/> Youth (Born 1990-1991)</p>	<p>HEPTATHLON</p> <p><input type="checkbox"/> Intermediate (Born 1988-1989)</p> <p><input type="checkbox"/> Young Women (Born 1986-1987)</p>	<p>DECATHLON</p> <p><input type="checkbox"/> Intermediate (Born 1988-1989)</p> <p><input type="checkbox"/> Young Men (Born 1986-1987)</p>
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THIS FORM MUST BE RETURNED TO THE ADDRESS SHOWN ABOVE. LATE ENTRIES WILL NOT BE ACCEPTED BEYOND THE DEADLINE DATE!

FOR OFFICIAL USE ONLY

ENTRY FORM COMPLETED CORRECT FEE PAID ATHLETE'S WAIVER/RELEASE FORM

You have approval to make additional copies of this form as needed.



2004 AAU Junior Olympic Games

Track and Field Boys' & Girls' Relay

TEAM ENTRY FORM



INSTRUCTIONS

- 1) Read all entry information and instructions before completing this document.
- 2) Complete all areas on the reverse side of this form and provide all requested information.
Failure to complete all areas of this form will delay the processing of your entry.
- 3) The Relay Team Entry Form must be accompanied by the individual athlete entry form with entry fees, to support each name on the Relay form.
- 4) Each relay team must be registered as an AAU Club prior to competing in any event. AAU Club Membership will be verified at Check-in.
- 5) No ADDITIONS or CHANGES to this form may be made after submission.
- 6) **Both** copies of this entry form (white and yellow) **must** be returned to the address shown below.

ENTRY DEADLINE: Received by Friday, July 16, 2004. **Late entries will not be accepted!**
Guaranteed overnight delivery is highly recommended to meet deadline date!
Please pay close attention to the submission instructions below.

- SEND:**
- 1) Track and Field Relay Team Entry Form with all items completed,
 - 2) Individual Athlete Entry Forms with all items completed,
 - 3) Correct entry fee of \$35.00 per athlete, and
 - 4) Signed Athlete Waiver/Release Form.

ENTRY FEE: There is no team fee, each individual athlete pays \$35.00, non-refundable.
SUBMISSION INSTRUCTIONS: Please send money orders or certified checks **ONLY** made payable to:
2004 AAU Junior Olympic Games.

Mailing Address: **2004 AAU Junior Olympic Games**

Attn: Track
 525 SW 5th Street, Suite C
 Des Moines, IA 50309-4501

Region # _____

Male Female
 (Check One)

TEAM & COACH INFORMATION

2004 AAU Club#:	Name of Relay Team:	Association:
Coach's Name:	E-mail Address:	
Coach's Address:		
City:	State:	Zip Code:
Coach's Home Phone:	Work Phone:	

EVENT INFORMATION

(SEPARATE ENTRY FORM FOR EACH RELAY EVENT) EVENT: CHECK ONE	AGE DIVISION: CHECK ONE	QUALIFYING TIME
<input type="checkbox"/> 4x100M <input type="checkbox"/> 4x400M <input type="checkbox"/> 4x800M	<input type="checkbox"/> Bantam <input type="checkbox"/> Midget <input type="checkbox"/> Youth <input type="checkbox"/> Intermediate <input type="checkbox"/> Young Men	

RELAY TEAM ROSTER (NO additions or changes authorized)

NAME (Please Print)	YEAR OF BIRTH	NAME (Please Print)	YEAR OF BIRTH
1.		5.	
2.		6.	
3.		7.	
4.		8.	

LATE ENTRIES WILL NOT BE ACCEPTED BEYOND THE DEADLINE DATE

FOR OFFICIAL USE ONLY

RELAY TEAM ENTRY FORM COMPLETED
 INDIVIDUAL ATHLETE ENTRY FORM COMPLETED
 ATHLETE'S WAIVER/RELEASE FORM

You have approval to make additional copies of this form as needed.



2004 AAU Junior Olympic Games Track and Field CLUB/TEAM ROSTER FORM



CLUB NAME: _____ AAU CLUB NUMBER: _____

Please indicate on the line below the **TOTAL NUMBER OF ATHLETES COMPETING FROM YOUR CLUB IN THE 2004 AAU Junior Olympic Games.** _____

NOTE: For any club with over 3 coaches, each additional coach (i.e. 4th coach, 5th coach, 6th coach, etc.) must submit the \$35.00 registration fee.

- Be sure to attach a Coaches Entry Form for each of the coaches that should receive a credential (maximum of three complimentary).
- Be sure to attach an Individual Athlete Entry Form and signed Athlete Release/Waiver Form for each athlete and payment of \$35.00/athlete along with this roster.
- Please list below all of the athletes from your club that have qualified for the AAU Junior Olympic Games and are submitting individual athlete entry forms and fees within this packet.
- Please submit Relay Team Entry Form within this packet.

ATHLETE NAME	GENDER M/F	AAU CARD NUMBER
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
19.		
20.		
21.		
22.		
23.		
24.		
25.		

LATE ATHLETE ENTRIES WILL NOT BE ACCEPTED BEYOND THE DEADLINE DATE

FOR OFFICIAL USE ONLY

TOTAL # OF COMPLEMENTARY CREDENTIALS ISSUED _____

You have approval to make additional copies of this form as needed.

Cut here, complete and send with fees only if submitting entry forms as a Club



2004 AAU Junior Olympic Games Track and Field CLUB/TEAM ROSTER FORM



CLUB NAME: _____ AAU CLUB NAME: _____

ATHLETE NAME	GENDER M/F	AAU CARD NUMBER
26.		
27.		
28.		
29.		
30.		
31.		
32.		
33.		
34.		
35.		
36.		
37.		
38.		
39.		
40.		
41.		
42.		
43.		
44.		
45.		
46.		
47.		
48.		
49.		
50.		

Please photocopy this side of form and add names if the number of Athletes exceeds 50.

FOR OFFICIAL USE ONLY		
	CLUB COACHES NAME (Maximum of three)	AAU CARD NUMBER
9-16	1.	
17-25	2.	
26+	3.	

"I hereby certify that each athlete(s) meet all eligibility requirements stated in the AAU Code Book and the AAU Youth Athletics Handbook."

Coach: _____
Signature Date

* All Coaches must submit the Coach's Entry Form.

* Additional coaches must also submit the \$35.00 coaches entry form.

You have approval to make additional copies of this form as needed.

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"), the Iowa Association of the AAU, the Greater Des Moines Sports Authority, its sponsors and suppliers, the State of Iowa, City of Des Moines, the County of Polk, the Des Moines Convention and Visitors Bureau and the municipalities in which any such activity is conducted, 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, (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 brought exclusively in binding Arbitration in Orange County, Florida, through AAA Arbitration or other Arbiter approved by RELEASEES, and subject to the Rules of AAA or the applicable Arbiter, and applicable Florida law.

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 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 and understand that the AAU retains title, exclusive and unlimited rights to all internet streaming files including live and archived games, interviews, and events broadcast to the Internet. 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): _____