2007 AAU-NEW JERSEY DISTRICT YOUTH TRACK AND FIELD CHAMPIONSHIPS
Individual Event Entry, Advancement and Waiver Form

Please print

Last Name _____ **First** _____

Address _____

City _____ **State** _____ **Zip** _____

Full AAU Club Name _____

AAU Club Number ___/___/___/___/___/___/___/___/___/___/___/___/___/___

AAU District (05) NEW JERSEY **AAU Region I**

2007 AAU Member No. ___/___/___/___/___/___/___/___/___/___/___/___/___/___/ **(Required)**

AGE GROUP

SEX: ☐ MALE ☐ FEMALE

- ☐ Primary (born 1999 or later)
- ☐ Sub-Bantam (Born 1998)
- ☐ Bantam (Born 1997)
- ☐ Sub-Midget (Born 1996}
- ☐ Midget (Born 1995)
- ☐ Sub-Youth (Born 1994)
- ☐ Youth (Born 1993)
- ☐ Intermediate (Born 1991 - 1992)
- ☐ Young M/W (Born 1989- 1990)

Birth Date _____/_____/_____

BIRTH DATE VERIFIED**

*Not yet 19 years of age by 8/5/06

Entry $17/Athlete, no charge for relays

District Championships

Please list events in which you are actually going to compete in the association meet.

	Event				Event		
1)	_____	_____	_____	3)	_____	_____	_____
2)	_____	_____	_____	4)	_____	_____	_____

Combined Events _____

Entry $20/Athlete, no charge for relays

Regional Championships

Please list events in which you are actually going to compete. list place, time, distance/height achieved at the association/state meet.

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

Athlete's Release: **In consideration of your acceptance of my entry into the AAUNEW JERSEY District Youth Track & Field Championships,** I voluntarily agree to participate in the **2006 AAU-NEW JERSEY District Youth Track & Field Championships** and knowingly assume any and all risk of loss, damage, property loss, injury (including death), both foreseen and unforeseen, of my attendance at and participation in the **AAU-NEW JERSEY District Youth Track & Field Championships**, from any cause whatsoever. I, for myself, my heirs, personal representatives and assigns do hereby release, waive, discharge and covenant not to sue **The Amateur Athletic Union, Inc., the local AAU Association** and the owner or lessee of any facility in which the **AAU-NEW JERSEY District Youth Track & Field Championships** are held (collectively "Releases") 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 Championships. I/we grant permission to the Meet Directors or their designee or the assigned Chaperones of any AAU-NEW JERSEY District Track & Field Championship, competition or program to act as guardian/spokesman with full authorization and power to authorize emergency medical treatment, including hospitalization and anesthesia, if medically necessary, for my/our son or daughter while in route to/from or at the site of the AAU-NEW JERSEY District Track & Field Championship, competition or program. I/we understand that should a health emergency arise, I/we will be notified but if/we cannot be reached by phone such medical treatment as is deemed necessary by medical personnel under the circumstances presented is hereby expressly authorized.

_____ _____

Signature - **ATHLETE** Signature - **PARENT / GUARDIAN**

(Must be signed if athlete is under 18 years of age.)

Telephone: (_____)_____

List allergies and current medications: _____

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

****Proof of Age: Verification Stamp (based on Birth Certificate, Certified Baptismal Record, Passport, Driver's License, or U.S. Military Identification)**