2020 USATF ILLINOIS MASTERS AND OPEN CROSS COUNTRY CHAMPIONSHIPS ENTRY FORM

MAY ONLY BE USED FOR MEET DAY REGISTRATION

Pleas	e <u>rs & Releases</u> e put a checkmark in the box beside each statement to indicate you have read and agree to it. tration for this event is conditioned upon acceptance of the terms below.
	Waiver of Liability & Assumption of Risk
	For and in consideration of USA Track & Field, Inc. ("USATF") allowing me, the undersigned, to participate in the 2020 USATF Illinois Masters and Open Indoor Track & Field Championships (the "Event"), I, for myself, and on behalf of my spouse, children, guardians, heirs and next of kin, and any legal and personal representatives, executors, administrators, successors and assigns, hereby agree to and make the following contractual representations pursuant to this Waiver and Release of Liability, Assumption of Risk and Indemnity Agreement (the "Agreement");
	1. I hereby represent that (i) I am at least sixteen (19) years of age or older; (ii) I am in good health and in proper physical condition to participate in the Event; and (iii) I am not under the influence of alcohol or any illicit or prescription drugs that would in any way impair my ability to safely participate in the Event. I agree that it is my sole responsibility to determine whether I am sufficiently fit and healthy enough to participate in the Event, that I am responsible for my own safety and well-being at all times and under all circumstances while at the Event site.
	2. I accept sole responsibility for my own conduct and actions while participating in the Event, the condition and adequacy of my equipment, and the protection of my private property.
	3. I hereby Release, Waive and Covenant Not to Sue, and further agree to Indemnify, Defend and Hold Harmless Joliet Park District, the Meet Directors and Officials, USA Track & Field, Inc., its Associations and Sport Disciplines, Sponsors, Advertisers, Coaches, Team Managers and Officials; and each of their respective parent, subsidiary and affiliated companies, officers, directors, partners, shareholders, members, agents, employees and volunteers (Individually and Collectively, the "Released Parties"), with respect to any liability, claim(s), demand(s), cause(s) of action, damage(s), loss or expense (including court costs, defense costs and reasonable attorneys fees) of any kind or nature ("Liability") which may arise out of, result from, or relate in any way to my participation in the Event, including claims for Liability caused in whole or in part by the negligent acts or omissions of the Released Parties, including with respect to the provision of information regarding rules and scheduling. I further agree that if, despite this Agreement, I, or anyone on my behalf, makes a claim for Liability against any of the Released Parties, I will indemnify, defend and hold harmless each of the Released Parties from any such Liabilities which any may be incurred as the result of such claim.
П	4. In the event that I am injured in connection with the Event, I hereby consent to the provision

of necessary and appropriate emergency medical treatment.

	5. As a condition of my participation in the Event, I hereby grant USA Track & Fi Association, the Meet Directors, any Meet sponsor and Joliet Park District a limit likeness, image, voice, video, athletic performance, biographical and other infor "Likeness"), in any format whatsoever, and to distribute, broadcast and exhibit restriction or liability, but only for the purposes of advertising or promoting Eve Athletics. This grant, however, does not constitute consent for USATF or any this an endorsement of any product or service without my specific written consent a and age information provided and confirmed as part of the entry process is true.	ted license to use my name, mation (collectively, these without charge, ent, USATF or the sport of rd party to use my Likeness in and I certify that the birth date
	 I certify that I have read and understand the USATF privacy statement to their terms and conditions. 	nt and terms of use and
Athlet	e's printed Full Name	
Athlet	e's signature	

Events Being Entered:	•		
(1)	_ Best Time/I	Distance	
(2)	BT/D		
(3)	BT/D		
(4)	BT/D		
(5)	BT/D		
(6)	BT/D		
(7)	BT/D		
Total entry fee paid:	\$		
Name(Printed)			
(Signature)			
Number: Age:		Age Group:	
Date of Birth:/		Gender: Male_	Female_
Address:			
E-mail address (plea clearly)	ase print		
Phone Number: Cell:			
Emergency Contact Number:	Name and		
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YOU MAY COMPLETE THIS IN ADVANCE FOR MEET DAY REGISTRATION ONLY

<u>Send completed entry forms and entry fees to: USATF IL</u> 1770 West State Street, suite A

1//0 West State Street, suite A

Sycamore, Illinois 60178

Tel: 815-991-5429 Fax: 779-222-4077

Email: <u>usatfil@sbcglobal.net</u>
Website <u>www.usatfillinois.org</u>