

GREEN BELT BANK RELAYS

(Formerly Hershey Track Meet)

- What:** If you like to run, jump or throw, join your friends...sign up now.
- When:** Tuesday, May 22, 2018 Rain Date – Thursday, May 24, 2018
Field Events start at 5:30 p.m.
Running Events start immediately after field events
- Where:** Iowa Falls High School Track – 1903 North Taylor Avenue
- Who:** Boys and Girls divisions in the following age groups:
7-8 year olds, 9-10 year olds, 11-12 year olds, 13-14 year olds
*Use Age as of December 31, 2018 for age group
Must be registered in your age division for all events (including relays).
- Registration:** Please fill out the registration form which is attached to this page.
Return registration to City Hall. This event is **FREE**.
Pre-Registration is required! Registrations are due by Friday,
May 18, 2018, at 4:30 p.m.
- Special Note:** Participants can sign up for two running and one field event or two field events and one running – the relay can be added as a fourth event.

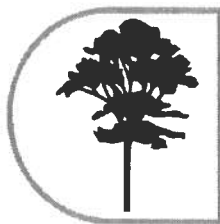
Awards and Ribbons will be given to all who participate.

No shoes designated for spikes will be allowed for track events. No shoes designed for turf surface sports (natural or artificial) will be allowed for field events, e.g. football or soccer shoes.

This event is co-sponsored by:

Iowa Falls Parks and Recreation Department

and



GREEN BELT
BANK & TRUST

For more information call the Parks and Recreation Department at 648-2527.

(see next page for entry form)



Live Healthy **IOWA**
TRACK Kids
CHAMPIONSHIPS

**OFFICIAL ENTRY FORM
2018**

EVENT MONTH/DAY: Tuesday ,May 22,2018

RAIN DATE: Thursday,May 24,2018

EVENT TIME: 5:30 p.m.

FACILITY NAME: Iowa Falls/ Alden High School Track

FACILITY ADDRESS: 1903 north Taylor Ave.

ORGANIZER NAME: Iowa Falls Parks and Recreation

ORGANIZER PHONE: 641-648-2527

ORGANIZER EMAIL: ifpro@cityofiowafalls.com

PLEASE PRINT

Name: _____ Date of Birth (MM/DD/YYYY): ____/____/____

Address: _____

City: _____ State: _____ Zip: _____

T-shirt size: Youth 6/8 10/12 14/16 Adult S M L XL XXL

Athletes will only receive a T-shirt if they qualify for the State Championships in Marshalltown

Parent/Guardian Day Phone: _____ Parent/Guardian Cell Phone: _____

Parent/Guardian Email: _____

Emergency Contact and Phone Number (other than listed above): _____

Participants can enter either **TWO TRACK AND ONE FIELD OR TWO FIELD AND ONE TRACK EVENT**.
The relay does not count as a running event.

Participant will complete in age & gender group according to their age on December 31, 2018 .

Please check the gender and events you wish to participate in at this meet.

BOYS 7-8 **GIRLS 7-8 (born in 2010-2011)**

- 50 Meter Dash 100 Meter Dash 200 Meter Dash
- 4x100 Meter Relay Standing Long Jump Softball Throw

BOYS 9-10 **GIRLS 9-10 (born in 2008-2009)**

- 50 Meter Dash 100 Meter Dash 200 Meter Dash 400 Meter Dash
- 4x100 Meter Relay Standing Long Jump Softball Throw

BOYS 11-12 **GIRLS 11-12 (born in 2006-2007)**

- 100 Meter Dash 200 Meter Dash 400 Meter Dash 800 Meter Run
- 4x100 Meter Relay Standing Long Jump Softball Throw

BOYS 13-14 **GIRLS 13-14 (born in 2004-2005)**

- 100 Meter Dash 200 Meter Dash 400 Meter Dash 800 Meter Run 1600 Meter Run
- 4x100 Meter Relay Standing Long Jump Softball Throw

RELAY TEAM (check gender, age group and list team members)

BOYS 7-8 GIRLS 7-8 BOYS 9-10 GIRLS 9-10 BOYS 11-12 GIRLS 11-12 BOYS 13-14 GIRLS 13-14

1. _____ 2. _____ 3. _____ 4. _____

THANK YOU FOR SIGNING THE WAIVER ON THE BACK

ATHLETE WAIVER AND RELEASE FROM LIABILITY (To be signed by Parent or Guardian)

In consideration of being permitted to enter for any purpose any RESTRICTED AREA (herein defined as the areas to which admission by general public spectators is prohibited and in addition, consisting of the planned route, or any other area which the participant chooses to access by any mode of transportation), or being permitted to compete, officiate, observe, work for, or for any purpose participate in any way in the event, EACH OF THE UNDERSIGNED, for himself/herself, his/her personal representatives, heirs, next of kin, acknowledges, agrees and represents that he/she has, or will immediately upon entering any of such restricted areas, and will continuously thereafter, inspect such restricted area or areas and all portions thereof which he/she enters and with which he/she comes in contact, and he/she does further warrant that his/her entry upon such restricted area and that he/she finds and accepts the same as being safe and reasonably suited for the purpose of his/her use, and further agrees and warrants that if, at any time, he/she is in or about restricted areas and he/she feels anything to be unsafe, he/she will immediately advise the officials of such and will leave the restricted area(s):

1. HEREBY RELEASES, WAIVES, DISCHARGES AND COVENANTS NOT TO SUE the Iowa Sports Foundation, d/b/a/ Live Healthy Iowa Kids, its affiliated clubs, organizations and licensed medical professionals, their respective administrators, officers, directors, representatives, agents, coaches, the promoters, hosts, other participants, operators, officials, sponsors, advertisers, owners and leasees of premises used to conduct the event and each of them, their officers, and employees, all for the purposes herein referred to as "releasees", from all liability to the undersigned, his/her personal representatives, assigns, heirs and next of kin for any and all damage, and any claim or demands therefore on account of injury to the person or property or resulting in death of the undersigned, whether caused by the negligence of the releasees or otherwise while the undersigned is in or upon the restricted area, and/or competing, officiating in, observing, or working for, or for any purpose participating in the event;
2. HEREBY AGREES TO INDEMNIFY AND SAVE HOLD HARMLESS the releasees and each of them from any loss, liability, damage, or cost they may incur due to the presence of the undersigned in or upon the restricted area or in any way competing, officiating, observing, or working for, or for any purpose participating in the event and whether caused by the negligence of the releasees or otherwise.
3. HEREBY ASSUMES FULL RESPONSIBILITY FOR AND RISK OF BODILY INJURY, DEATH OR PROPERTY DAMAGE due to the negligence of releasees or otherwise while in or upon the restricted area and/or while competing, officiating, observing, or working for or for any purpose participating in the event.
4. EACH OF THE UNDERSIGNED expressly acknowledges and agrees that the activities at the event and in the restricted areas are dangerous and involve the risk of serious injury and/or death and/or property damage. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion thereof is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.
5. Hereby consent to allow my picture and/or voice or likeness to appear in any official documentary, promotional, exclusive television, radio or film coverage of the Iowa Sports Foundation, d/b/a/ Live Healthy Iowa Kids in any manner incidental to my participation in the Iowa Sports Foundation, d/b/a/ Live Healthy Iowa Kids and without compensation to me. THE UNDERSIGNED HAS READ THIS WAIVER AND RELEASE FROM LIABILITY, FULLY UNDERSTANDS ITS TERMS, UNDERSTANDS THAT SUBSTANTIAL RIGHTS ARE GIVEN UP BY SIGNING IT, AND SIGNS IT FREELY AND VOLUNTARILY, and further agrees that no oral representatives, statements or inducement apart from the foregoing written agreement have been made. This waiver, release and indemnification agreement, specifically embraces each and every event sanctioned, authorized, sponsored, co-sponsored, or promoted by said releasees during the entire season, including, without limitation, local or regional qualifying events, wherever located, and applies to each and every event, or activity hereinabove mentioned, and has the same effect as if executed after each and every activity or event in which the undersigned participates so that the parties herein intended to be released and indemnified shall be fully and effectively released and indemnified as to each and every event hereinabove described.

The undersigned, _____ referred to as the parent(s) and natural guardian(s) or legal guardian(s) of _____ does thereby represent that he/she (they) is (are), in fact, acting in such capacity and agrees to save and hold harmless and indemnify each and all of the parties herein referred to above as releases from all liability, loss, cost, claim or damage whatsoever may be imposed upon said releasees because of any defect in or lack of such capacity to so act and release said releasees on behalf of both of the undersigned.

Parent/Guardian Signature

Relationship to the Minor

Date