

2016 USATF-NE ALL-COMERS MEET, FRANKLIN PARK, BOSTON MA ENTRY FORM

NOTE: Entries to be submitted on day of the event only. Please do not mail.

First Name: _____ Last Name: _____ Male/Female: _____
 Address: _____ Youth – Year of birth _____
 City: _____ State/Zip: _____ Open – Date of Birth _____
 Club: _____ 2016 USATF Number: _____

<u>Meet Date</u> Sunday, October 16, 2016	Entry Fee: \$1.00 – 1.1 mile youth 14 & under \$3.00 – 5K Youth 15-17 and adult USATF members \$5.00 – 5K adults not USATF members	Make check payable to: USATF-NE BRING COMPLETED FORM TO THE MEET ENTER ON DAY OF EVENT ONLY!
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Assumption of Risk: I recognize that participating in cross country running is a potentially hazardous activity and may result in serious injury. I understand that there is uneven footing and challenging terrain on the course. In exchange for acceptance of this entry, I for myself, executors, administrators and assigns, do hereby release any rights and claims for damages I may have against USATF, USATF-New England, the City of Boston MA, and any and all sponsors and individuals involved with the presentation and conduct of this meet. I hereby attest that I have full knowledge of the risk involved in competing in this event, and am physically fit and sufficiently trained to participate in this event. If entering a child, I have explained the risk to my child.

Signature: _____ Date _____
 (Parent or Guardian if under age 18)

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