

HAMMERAMA 2010

SUNDAY JULY 18, 2010
CURTIS CORNER MIDDLE SCHOOL
301 CURTIS CORNER ROAD
WAKEFIELD, RI 02879
USA TRACK & FIELD SANCTIONED (#10-02-290)

SPONSORED BY
M-F ATHLETIC COMPANY
PROVIDENCE COBRAS TRACK CLUB

ORDER OF EVENTS
HIGH SCHOOL BOYS' 12# - 10:00 A.M.
HIGH SCHOOL GIRLS'4k
DEVELOPMENTAL (younger throwers, various implements)
OPEN MEN'S 16#
OPEN WOMEN'S 4k

The top six finishers in the high school boys' and high school girls' competition will have the opportunity to compete in the open divisions if they so desire.

This is a USATF sanctioned event. USATF rules will be followed.

Awards (medals) for first six places in each division.

PREREGISTRATION ONLY

Registration is \$6.00 per event. Make check payable to Bob Gourley. Send completed application and entry fee to: Bob Gourley, 3 Greenville Dr., Barrington, RI 02806. For additional information call Bob Gourley (401) 246-0243, or e-mail: rmgourley@fctvplus.net. Entries must be received by Wednesday, July 14, 2010.

	Plan to enter:		Best 2010 Distance
Name: _____	HS girls' 4k	[]	_____
Address: _____	HS boys' 12#	[]	_____
City/Town: _____	Open 4k	[]	_____
State: _____ Zip Code: _____	Open 16#	[]	_____
Phone: (_____) _____	email: _____		

(Please print neatly.)

RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT

In consideration of the acceptance of the application for entry into this event, I hereby waive, release and discharge any and all claims for damages for death, personal injury, or property damage which I may have, or which may hereafter accrue to me as a result of my participation in Hammerama 2010. This release is intended to discharge in advance the Town of South Kingstown, the Town Council, the South Kingstown Recreation Commission, its officers, agents and employees, USA Track & Field, USA Track & Field-New England, M-F Athletic Company, Providence Cobras Track Club, officials and staff and other participants or spectators from and against any and all liability arising out of or connected with my participation in Hammerama 2010.

I AM AWARE THAT THIS ACTIVITY SUBJECTS ME TO PHYSICAL RISKS AND DANGERS. NEVERTHELESS, I VOLUNTARILY AGREE TO ASSUME ANY AND ALL RISKS OR INJURY OR DEATH, AND TO RELEASE, DISCHARGE AND HOLD HARMLESS ALL OF THE ENTITIES OR PERSONS MENTIONED ABOVE. IT IS UNDERSTOOD AND AGREED THAT THIS WAIVER, RELEASE AND ASSUMPTION OF RISK IS TO BE BINDING ON BY HEIRS, PERSONAL REPRESENTATIVES, NEXT OF KIN, SPOUSE AND ASSIGNS.

Signature of Participant if 18 years old or older: _____
(Signature of Parent or Guardian if participant is under the age of 18.)

Date: _____