



COUNTY OF KAUAI
PARKS & RECREATION

2020 MAYOR'S YOUTH TRACK MEET
APPLICATION FORM

NAME OF PARTICIPANT: _____ SCHOOL: _____

ELIGIBILITY: Any Boy or Girl in Kindergarten - 8th grade. (Must be Resident of the County of Kauai)

RULES: Please see your coach or school official for additional rules

Date And Time:

Saturday, April 4, 2020 Grade K & 1st / 2nd & 3rd / 4th & 5th (Elem Div.) Vidinha Stadium @ 9:00 am

Sunday, April 5, 2020 Grade 6th & 7th / 8th (Middle School Div.) Vidinha Stadium @ 11:00 am

ENTRY LIMITATIONS: Participants can ONLY enter in their designated GRADE group! No exceptions will be made.

EQUIPMENT:

SHOES ARE REQUIRED TO PARTICIPATE: CLEATS OR SPIKES are NOT ALLOWED. Shoes may have knobs or waffles. If you have any questions, PLEASE CONSULT MEET DIRECTOR PRIOR TO START OF MEET. No starting blocks will be allowed.

PLEASE CHECK APPROPRIATE GENDER AND SCHOOL GRADE:

Boy _____ Girl _____ K & 1 _____ 2nd & 3rd _____ 4th & 5th _____ 6th & 7th _____ 8th _____

EVENTS: (select up to "3" events only + be on relay team (*No Relay for K-1)

___ STANDING BROAD JUMP

___ SOFTBALL THROW

___ 100 M DASH

___ 800 M RUN-Event only for Middle School Division.

___ 50 M DASH - **NO EVENT FOR GRADES K-1**

___ 200 M RUN - **NO EVENT FOR GRADES K - 1**

___ RELAY TEAM - **NO EVENT FOR K-1**

___ 400 M RUN- **NO EVENT FOR GRADES K - 1 / 2nd & 3rd**

PARENT'S OR GUARDIAN'S WAIVER OF CLAIM AND INDEMNITY AGREEMENT /MEDIA RELEASE

For and in consideration of the County's providing the above mentioned program, we, the undersigned, jointly, individually and in any representative or legal capacity, on behalf of our respective selves, heirs, executors and /or administrators, do hereby waive, release, discharge and agree to hold harmless and indemnify the COUNTY OF KAUAI, it's officers, employees and agents, individually and in their capacity, from all liability or loss of any claim for death, injury, or damage to property resulting directly or indirectly from the undersigned participant's participation in the program. We further avow that our aforesaid waiver, release, discharge and agreement shall be applicable to any owner of a facility and/or property at or upon which the program is held. I, also grant permission to the County of Kaua'i to use photographs or videos taken of my child participating in said event for publication and media purposes only.

PRINT NAME OF PARENT OR GUARDIAN

DATE _____

SIGNATURE OF PARENT OR GUARDIAN

PLEASE PRINT PARTICIPANTS INFORMATION

ADDRESS: _____
(Street) (City) (State) (Zip Code)

CHILDS BIRTH DATE: _____ AGE: _____ TEL. No. _____ / _____
(Residence) (Business)

IN CASE OF EMERGENCY NOTIFY: _____
(Relationship)

FAMILY DOCTOR: _____ PHONE NUMBER _____

If an auxiliary aid or program modification is needed please call Recreation Office @ 241-4462 at least five working days before the event.