

**USATF National Junior Olympic
Cross Country Championships**

Rim Rock Farm –Lawrence, KS

Dec. 8, 2007



OFFICIAL/VOLUNTEER REGISTRATION

NAME: _____
Mailing Address: _____ City: _____ Zip Code _____
Home Phone (____) _____ Work Phone (____) _____ Cell (____) _____
E-mail _____

Certified USATF official Yes No
If yes, what level _____ Areas _____

Days you are available to work:
Thursday, Dec. 6 _____ Friday, Dec. 7 _____ Saturday, Dec. 8 _____

Please check what areas you are interested in: (check)

Course Monitor	_____	Take Down Crew	_____
Timing Helper	_____	Traffic Control	_____
Finish Chute	_____	Starting Line	_____
Packet Pick-up	_____	Food Service	_____
Set Up Crew	_____		

Additional Information

Information you believe to be valuable in making your volunteerism an enjoyment and success.

Release

Official's Release: I voluntarily agree to officiate/work in the 2007 USA Track & Field Junior Olympic Cross Country Championships and knowingly assume any and all risks of loss, damage to my person or property, injury (including death), both foreseen and unforeseen, of my attendance at and participation in the 2007 USA Track & Field Junior Olympic Cross Country Championships, from any cause whatsoever, including the fault or negligence of Releasees (as defined below). I, for myself, my heirs, personal representatives and assigns do hereby release, waive, discharge and covenant not to sue USA Track & Field, Inc., the local USATF Association, the Local Organizing Committee, the Facility and Championship Sponsors, their respective officers, directors, employees, agents and volunteers (collectively "Releasees") from all liability, loss, claims, demands, possible causes of action, court costs, settlement costs and fees, attorneys fees and any other expenses arising from any claim or lawsuit that may arise from any loss, damage or injury (including death) to me or my property resulting from or arising in connection with, or related to, my attendance at or participation in the 2007 USA Track & Field Junior Olympic Cross Country Championships. In the event that I am injured, I hereby consent to the provision of necessary and appropriate emergency medical treatment.

Signature

Date

MAIL TO: GILBERT CASTILLO, 4740 ROANOKE PKWY #104, KANSAS CITY, MO 64112