

Relay Team (circle age)

Born in 2003 or 2004
(Boys 9-10)

Born in 2001 or 2002
(Boys 11-12)

Born in 1999 or 2000
(Boys 13-14)

1. _____
(First Name) (Last Name)

2. _____
(First Name) (Last Name)

3. _____
(First Name) (Last Name)

4. _____
(First Name) (Last Name)

Relay Team (circle age)

Born in 2003 or 2004
(Girls 9-10)

Born in 2001 or 2002
(Girls 11-12)

Born in 1999 or 2000
(Girls 13-14)

1. _____
(First Name) (Last Name)

2. _____
(First Name) (Last Name)

3. _____
(First Name) (Last Name)

4. _____
(First Name) (Last Name)

REGULATIONS

Eligibility

Name of School/Community _____

City, State/Province/Territory _____

Age as of December 31, 2013 _____

*All participants must compete in their age group and sex division.

*A legal birth document must be presented to the local organizer.

PARENT/GUARDIAN CONSENT:

Emergency Information: _____
Parent or Guardian's Name Phone Number

Emergency name and number other than listed above: _____

The above named participant and the participant's parent/guardian have requested registration of the participant in the Hershey's Track & Field Games. In consideration of such registration, the right of the participant to compete in the Hershey's Track & Field Games and the use by the participant of the sponsoring agency's facilities and equipment, both the participant and the parent/guardian each acknowledge that the participant will be competing in the Hershey's Track & Field Games, traveling, and using sponsoring agency's facilities at the participant's sole risk and the participant, on his or her own behalf and on the behalf of his or her heirs, executors, administrators and assigns hereby releases, discharges and agrees to hold harmless The Hershey Company, the National Recreation and Park Association, the National Association for Sport & Physical Education and Athletics Canada and each of their officers, directors and any subsidiary companies. **We understand that those participants who advance to the state/provincial/territory level and are winners at that level do not automatically advance to the regional level for the North American Final meet. This is covered under Rule 9, Article 1 in the rule book.** We also agree to allow the Hershey's Track & Field Games to use and reproduce the participant's name and/or likeness and/or information concerning the participant and to circulate the same for any and all purposes in any manner. We certify that the information on this participation form is correct.

I understand that the North American Final meet is managed by The Hershey Company and that all qualifying meets for the North American Final meet are managed by a sponsoring agency. I understand and agree that this release will apply to any and all events and activities my child may participate in as a participant in Hershey's Track & Field Games including travel to and from the North American Final and all activities that are a part of the Finals. I further understand and agree that if my child qualifies for and chooses to participate in the North American Final meet, they will be required to participate in the program from August 1 through August 4, 2013.

(Signature of Parent or Guardian)

(Date)

Relay Team (circle age)

Born in 2002 or 2003
(Boys 9-10)

Born in 2000 or 2001
(Boys 11-12)

Born in 1998 or 1999
(Boys 13-14)

1. _____
(First Name) (Last Name)

2. _____
(First Name) (Last Name)

3. _____
(First Name) (Last Name)

4. _____
(First Name) (Last Name)

Relay Team (circle age)

Born in 2002 or 2003
(Girls 9-10)

Born in 2000 or 2001
(Girls 11-12)

Born in 1998 or 1999
(Girls 13-14)

1. _____
(First Name) (Last Name)

2. _____
(First Name) (Last Name)

3. _____
(First Name) (Last Name)

4. _____
(First Name) (Last Name)

REGULATIONS

Eligibility

Name of School/Community _____

City, State/Province/Territory _____

Age as of December 31, 2012 _____

*All participants must compete in their age group and sex division.

*A legal birth document must be presented to the local organizer.

PARENT/GUARDIAN CONSENT:

Emergency Information: _____
Parent or Guardian's Name Phone Number

Emergency name and number other than listed above: _____

The above named participant and the participant's parent/guardian have requested registration of the participant in the Hershey's Track & Field Games. In consideration of such registration, the right of the participant to compete in the Hershey's Track & Field Games and the use by the participant of the sponsoring agency's facilities and equipment, both the participant and the parent/guardian each acknowledge that the participant will be competing in the Hershey's Track & Field Games, traveling, and using sponsoring agency's facilities at the participant's sole risk and the participant, on his or her own behalf and on the behalf of his or her heirs, executors, administrators and assigns hereby releases, discharges and agrees to hold harmless The Hershey Company, the National Recreation and Park Association, the National Association for Sport & Physical Education and Athletics Canada and each of their officers, directors and any subsidiary companies. **We understand that those participants who advance to the state/provincial/territory level and are winners at that level do not automatically advance to the regional level for the North American Final meet. This is covered under Rule 9, Article 1 in the rule book.** We also agree to allow the Hershey's Track & Field Games to use and reproduce the participant's name and/or likeness and/or information concerning the participant and to circulate the same for any and all purposes in any manner. We certify that the information on this participation form is correct.

I understand that the North American Final meet is managed by The Hershey Company and that all qualifying meets for the North American Final meet are managed by a sponsoring agency. I understand and agree that this release will apply to any and all events and activities my child may participate in as a participant in Hershey's Track & Field Games including travel to and from the North American Final and all activities that are a part of the Finals. I further understand and agree that if my child qualifies for and chooses to participate in the North American Final meet, they will be required to participate in the program from August 2 through August 5, 2012.

Registration Form

Please Note: All information listed will appear on your account. If parents reside at different addresses and you would like information sent to both addresses, please provide us with the second address.

Part 1 » Family Information (please print clearly)

Family's Last Name: _____ Address: _____ City: _____

Zip: _____ Home Phone: () _____ Alternate Phone Number: () _____

Name of Parent: _____ Parent's Work Number: () _____

Name of Parent: _____ Parent's Work Number: () _____

Head of Household's e-mail Address: _____

Part 2 » Fill in 1st and 2nd choice programs for each participant (Please pay the higher of the 2 fees when including 2nd choice programs)

Participant's Name	Sex	Birthdate	Program	Code Number	Age	Fee
	<input type="radio"/> M <input type="radio"/> F		1st Choice			
			2nd Choice			
	<input type="radio"/> M <input type="radio"/> F		1st Choice			
			2nd Choice			
	<input type="radio"/> M <input type="radio"/> F		1st Choice			
			2nd Choice			
	<input type="radio"/> M <input type="radio"/> F		1st Choice			
			2nd Choice			
Please describe any accommodation needed for your enjoyment of this program:				Credit Balances of \$10 or less will be applied to your account.		Total Fees = \$ _____

Part 3 » Signature

Waiver and Release of All Claims - Must be signed or registration cannot be processed.

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in Buffalo Grove Park District programs, you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of said programs.

I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damages or loss regardless of severity which I or my child/ward may sustain as a result of participating in any activities connected or associated with any such program(s). I waive and relinquish all claims I or my child/ward may have against the Park District and its officers, agents, servants and employees as a result of participant in any of the above program(s). I hereby fully release and discharge the Park District and its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I or my child/ward may have or which may accrue to me or my child/ward on account of my participation or the participation of my child/ward in any of the above program(s). I further agree to indemnify and hold harmless and defend the Park District and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or by my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s). Photo Disclaimer: Registrants and participants of programs and special events permits the Park District to take photos and videos of themselves and their children for publication in the program brochure, website and additional uses as the Park District deems necessary unless the registrant or participant expressly files with the Park District a written objection as to photos or videos of themselves and/or their children.

I have read and fully understand the program details and waiver and release of all claims.

Signature of Participant or Parent (If participant is under 18)

Date

Part 4 » Fill in Charge Card Information

This section must be filled out if you are using VISA, Mastercard or Discover

Charge My: _____ Account Number _____
 Visa _____ Expiration Date _____
 Mastercard _____ Card holder (print name) _____
 Discover _____ Amount of Payment \$ _____
 Authorized Signature _____

Part 5 » Return your form to the Park District

Mail in, Drop off or Fax it in!



Buffalo Grove Park District
 530 Bernard Drive
 Buffalo Grove, IL 60089
 Fax: (847) 459-5741