# 2004 AAU Youth Cross Country National Championship

# Official Entry Packet



December 4, 2004 • Cattails at Meadowview • Meadowview Conference Resort and Convention Center

Cattails at MeadowView Kingsport, TN December 4, 2004

## 2004 AAU YOUTH CROSS COUNTRY NATIONAL CHAMPIONSHIP

## Cattials at MeadowView Kingsport, Tennessee **DECEMBER 4, 2004**

Sanctioned by Amateur Athletic Union Hosted by Kingsport

Convention & Visitor's Bureau

**Meet Director** John Boyer AAU National Meet Director Phone Number 504-394-3862

AAU National Headquarters Frank Lett 1910 Hotel Plaza Blvd Lake Buena Vista, FL 32830 407-828-4394

**Travel Information** Kingsport CVB 151 East Main Street Kingsport, TN 37660 800-743-5282

ATHLETE ENTRY FORM:

Each qualified athlete who plans to participate in the 2004 National Cross Country championship meet must complete the official Individual Athlete Entry Form and Athlete Waiver/Release form and forward it to the AAU National Headquarters at the address listed below along with the correct entry fee by the proper deadline date. Each athlete must bring proof of age, and his or her current 2005 membership card. Please note that the mandated AAU membership year is September 1-August 31.

ATHLETE ENTRY FEE:

\$30.00 per person. Each athlete must fill out the Individual Athlete Entry Form and pay the entry fee. Please make money order or cashiers check payable to: AAU National Cross Country. Club or personal checks will not be accepted. No refunds will be issued.

TEAM/ENTRY FORM:

Qualified teams must submit the official Team Entry Form and attach no more than eight (8) Individual Athlete Entry Forms. Teams must provide proof of current 2005 AAU Club Membership. Note: There is no additional entry fee, but each team member must bring proof of current club membership.

ENTRY DEADLINE: ENTRY MUST BE RECEIVED NOT LATER THAN NOVEMBER 24, 2004. Mail entry to:

If submitting by US Mail (regular or express) send to:

AAU NATIONAL HEADOUARTERS ATTN: CROSS COUNTRY P.O. BOX 22409 LAKE BUENA VISTA, FL 32830

(FedEx, Airborne, or UPS) send to: AAU NATIONAL HEADOUARTERS ATTN: CROSS COUNTRY

If submitting via overnight delivery

1910 HOTEL PLAZA BLVD LAKE BUENA VISTA, FL 32830

407-934-7200

#### MEET

Qualification for the 2004 AAU National Cross Country Championship is only available **QUALIFICATIONS:** through local AAU District Championships throughout the country. The top twenty (20) individuals from each AAU District, not including members of the top three (3) teams, advance to the AAU National Championship. Teams may consist of no more than eight (8) individuals. NO ALTERNATES ARE PERMITTED. Athletes may not advance in any level of competition without successfully qualifying through the District Championship. NO WAIVERS WILL BE GRANTED.

#### **AGE DIVISIONS & DISTANCES:**

Bantam Boys and Girls	Born 1994 or after	3000 meters
Midget Boys and Girls	Born 1992-1993	3000 meters
Youth Boys and Girls	Born 1990-1991	4000 meters
Intermediate Boys and Girls	Born 1988-1989	5000 meters
Young Men and Young Women	Born 1986-1987	5000 meters

<sup>\*</sup>Athletes who are still 18 years of age on the day of the AAU National Cross Country National Championship Meet shall be eligible to compete in the Young Men's or Young Women's division.

#### PROOF OF AGE & MEMBERSHIP:

All participants are required to bring a copy of their birth certificates, driver's license, or other acceptable proof of age. All participants are required to have a 2005 AAU membership card. Your AAU membership number must be provided on your official individual Athlete Entry Form. Participants must be prepared to show their AAU card at registration. No athlete will be permitted to run without a current AAU membership card. No entry forms will be processed without your AAU membership number on the form. Avoid penalties and delays - provide complete documentation.

**HOTELS:** Please see attached list of hotels.

**RULES:** The meet will be conducted under the AAU Youth Athletics Rules for Cross Country, and the

competitive rules of the National Governing Body.

#### **REGISTRATION & DIRECTIONS:**

Registration will be held on Friday ONLY at the MeadowView Conference Resort and Convention Center, 1901 MeadowView Parkway, Kingsport, Tennessee in Convention Center B. Coaches picking up team packets and unattached athletes picking up individual packets may come at the following time to register and check in.

Registration Location Time: Friday, December 3 MeadowView Conference Resort 10:00 a.m. – 10:00 p.m. And Convention Center

#### **Directions to MeadowView Conference Resort and Convention Center:**

From the South: Traveling on Interstate 40 from Knoxville, Take 81 North to Bristol. Travel until you come to Exit 57B, take that exit and that will put you on Interstate 1-81. Travel until you see Exit 52, which will be the MeadowView Parkway exit. Turn right at the end of the ramp and MeadowView Resort will be directly on your right.

From the North: Traveling south on Interstate 75 towards Richmond and Knoxville take Interstate 275 South towards Asheville. Then take Exit 3, the Interstate 640 East exit towards Asheville. Take Interstate 40 East towards Asheville until you come to Exit 421, which will be Interstate 81 North to Bristol. Travel until you come to Exit 57B, take that exit and that will put you on Interstate 181. Travel until you see Exit 52, which will be the MeadowView Parkway exit. Turn right at the end of the ramp and MeadowView Resort will be directly on your right.

From the Northeast: Travel South on Interstate 81. Travel until you come to Exit 57B in Tennessee, take that exit and that will put you on Interstate 181. Travel until you see Exit 52, which will be the MeadowView Parkway exit. Turn right at the end of the ramp and MeadowView Resort will be directly on your right.

**COURSE:** 

The course(s) will take each participant throughout the Cattails at MeadowView Golf Course. The course(s) will wind around the golf course and will offer scenic views of Bays Mountain. Athletes will run primarily on soft grass with the occasional crossing of the asphalt cart paths and bridges. The course appears flat, but there are several gradual elevation changes, which can be deceiving. The staging area will be located at the starting line and will be restricted to athletes wearing proper identification. Courses will be well marked and the finish area will be flagged. Athletes may wear spikes, but spikes must be no more than a maximum of 1/4 inch. Athletes wearing any length greater than ¼ inch will not be allowed to participate. Also, no spikes or muddy shoes are permitted anywhere in the clubhouse or the hotel.

**COURSE** 

Athletes will be able to walk and view the course on Friday, December 3<sup>rd</sup> from 12:00 to dusk.

WALK:

Friday Guided walks will be as follows: 3000 M. Course Walk: 12:45 pm – 1:30 pm 4000 M. Course Walk: 1:45 pm - 2:30 pm 5000 M. Course Walk: 2:45 pm – 3:30 pm.

The course will also be open on Saturday morning until 9:00 am.

The course will close promptly at 9:00 am Saturday to prepare for competition.

**SPIKES:** 

Athletes may wear spikes, but spikes may be no more than a maximum of \( \frac{1}{4} \) inch. Athletes wearing any length greater than ¼ inch will not be allowed to participate. Also, no spikes or muddy shoes are permitted anywhere in the clubhouse or the hotel.

**STARTING POSITION:**  Athletes will be assigned starting position by team and unattached numbers. These positions will

be randomly drawn for each race.

**BIB NUMBERS:** 

Each competitor will receive two bib numbers (front and back). Hip numbers will be worn on the hips (left and right).

**RACE SCHEDULE:** Athletes should be prepared to check in with the clerk at least 30 minutes prior to the start.

National Anthem	9:50 a.m.		
Bantam Girls	10:00 a.m.	Bantam Boys	10:30 a.m.
Midget Girls	11:00 am	Midget Boys	11:30 a.m.
Youth Girls	12:00 Noon	Youth Boys	12:30 p.m.
Intermediate Girls	1:00 p.m.	Intermediate Boys	1:30 p.m.
Young Women	2:00 p.m.	Young Men	2:30 p.m.

**AWARDS:** 

AAU National Championship medals will be awarded to 1st -50th place. In addition, team plaques will be presented to the top three teams in the each age division, and AAU National Championship medals will be presented to each member of the top three teams. All-American patches will be awarded to the first place finisher and the first place team in each age division.

**PARTICIPATION AWARDS:** 

Each participant will receive an official AAU National Championship souvenir t-shirt and certificate to commemorate the event.

AWARDS PRESENTATION: After each race there will be an official awards ceremony. Each age division will have a time to when they will be presented with their awards. Team and individual athlete 1st through 8<sup>th</sup> medals will be awarded at this time. Other individual medals will be handed out at the conclusion of each race at the end of the finish line. The awards ceremony will be approximately 30 minutes after each race.

**SOUVENIRS:** 

Will be available for purchase at registration on Friday and at the course on Saturday. A souvenir order form has also been included in this entry packet.

**CONCESSIONS:** Food and beverages will be available at the meet from 8:00 a.m. to 3:00 p.m. on Saturday,

December 4<sup>th</sup>. A lunch pre-order form is provided in this packet.

**RESTROOMS:** Available in MeadowView Conference Resort and Convention Center and on the Course.

**WEATHER:** The average temperature in Kingsport ranges between 30-49 degrees F in early December. Please

come prepared and dress accordingly. No spikes or muddy shoes are permitted anywhere

in the clubhouse or the hotel.

**MEDICAL:** Holston Medical Group will provide athletic trainers and physicians near the finish line in the

designated area. Athletic trainers will also be following the participants during the race. Water

stations will be located near the start and finish areas. Please check the course map.

**ENTRY FORMS** Coaches – please photocopy enough Entry Forms and Waiver Forms for your team. Each minor

& WAIVERS: must have parent or guardian sign the Waiver Form. All waivers due prior to registration.

**PRE-RACE** The Pre-Race Pasta Dinner will be located at Sullivan South High Scool.

**PASTA DINNER:** Information on the Pre-Race Pasta Dinner and a reservation form is included in this packet.

## 2004 AAU CROSS COUNTRY NATIONAL CHAMPIONSHIPS ATHLETE ENTRY FORMS

Entry Deadline: Must be received by Wednesday, November 24, 2004.

Guaranteed overnight delivery is recommended to meet deadline date!

All entries received after deadline will be returned!

**Entry Fee:** \$30.00 per athlete.

**Send:** 1) Youth Cross Country Individual Athlete or Team Entry Form with all items

completed.

2) Correct Entry Fee of \$30.00 per athlete.

3) Signed Athlete Waiver/Release Form (s) for each athlete.

**Submission** 

Instructions: US Mail Overnight Delivery

AAU National Headquarters AAU National Headquarters

Attn: Cross Country
P.O. Box 22409
Attn: Cross Country
1910 Hotel Plaza Blvd

Lake Buena Vista, FL 32830 Lake Buena Vista, FL 32830

#### **For More Information:**

AAU National Meet Director Contact: John Boyer Boyertrack@aol.com

504-394-3862

AAU National Headquarters Contact: Frank Lett

frank@aausports.org

407-828-4394

## 2004 AAU Cross Country National Championships Individual Athlete Entry Form Saturday, December 4, 2004 Cattails at MeadowView Kingsport, Tennessee

# Each Unattached athlete must complete the following form, and return by Wednesday, November 24, 2004, to:

US Mail
AAU National Headquarters
Attn: Cross Country
P.O. Box 22409
Lake Buena Vista, FL 32830

Overnight Delivery
AAU National Headquarters
Attn: Cross Country
1910 Hotel Plaza Blvd.
Lake Buena Vista, FL 32830

**Note: Please Print** 

Name: \_\_\_\_\_ Circle one: M F Birthdate: \_\_\_\_\_

City, State:		AAU #:			
District:		Finishing Place:			
Age Division:		Phone#: _			
Email:					
<u>Division</u>	<u>Distance</u>	Birth Years			
Bantam	3K	1994 & After			
Midget	3K	1992-1993			
Youth	4K	1990-1991			
Intermediate	5K	1988-1989			
Young	5K	1986-1987*			
	e still eighteen (18) years of age Young Men's and Young Wome		ional Cross Country Meet, shall be eligible to		
•	it card (check one):				
oVISA	o MASTER CARD	o DISCOVER	o AMERICAN EXPRESS		
Credit Card Num	ber:		Expiration Date:		
Name on Card (p	rint):		Signature:		

#### ATHLETE WAIVER/RELEASE FORM ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in any Amateur Athletic Union of the U.S. Inc. activity ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND that: (a) ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time: and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity. 3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Amateur Athletic Union of the U.S. Inc. (AAU), Southeastern AAU, the States of Tennessee, Kingsport Chamber of Commerce, Kingsport Convention and Visitors Bureau, its sponsors and suppliers, MeadowView Conference Resort and Convention Center, Cattails at MeadowView, the City of Kingsport, including its parent company and related affiliated and subsidiary companies of each, as well as the officers, directors, agents, employees and assigns of each, and the AAU's Associations, clubs, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by the AAU, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Release's, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim.

#### **Agreement to Participate**

I ,or we, grant to the Directors, Assistants, or assigned chaperons of this event to act as guardians/spokesman in granting permission for emergency treatment/hospitalization (including anesthesia) if necessary for my child en route to or from or at the site of AAU event or hospital or other medical facility. I understand that should a health emergency arise, I will be attempted to be notified, but that if I cannot be reached by telephone, such medical treatment as deemed necessary by competent medical personnel is authorized. I hereby state that to the best of my knowledge the following information is complete: PERSONAL PHYSICIAN'S NAME: \_\_\_\_PHONE:\_\_\_\_ I am presently taking the following medication or pills: I am allergic to the following (medicine, bee/insect stings, other): I hereby authorize the AAU to allow the reproduction, dissemination, and/or publication of my name and likeness for media coverage, public relations, or any other purpose which may involve the use of photographs, films, and/or video tape recording. This is to be done in conjunction with my participating in this AAU event and I understand and agree that I may neither pay a fee to receive individual promotional consideration from my participation in this event, nor will I receive any payment for the possible commercial use of my name or likeness. INSURANCE: AAU membership provides excess medical insurance for any member athlete participating in an AAU-sanctioned practice or event. If the athlete has other medical coverage, theirs will be applied first, followed by AAU insurance. I HAVE READ THIS AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT AND HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE AND INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT. PRINTED NAME OF **PARTICIPANT**:\_\_\_\_\_PHONE:\_\_\_\_ **PARTICIPANT'S** SIGNATURE (only if age 18 or over): MINOR RELEASE: AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF ATHLETIC ACTIVITIES AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR COST ANY MAY INCUR AS THE RESULT OF ANY SUCH CLAIM.

(State)

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18):

(City)

PRINTED NAME OF **PARENT/GUARDIAN**:

(Street)

ADDRESS:

PHONE:

# 2004 AAU Cross Country National Championships Team Entry Form Saturday, December 4, 2004 Cattails at MeadowView Kingsport, Tennessee

Each team must complete the following form, and return by November 24, 2004, to:

US Mail
AAU National Headquarters
Attn: Cross Country
P.O. Box 22409
Lake Buena Vista, FL 32830

Team/Club Name: \_\_\_\_\_

Overnight Delivery
AAU National Headquarters
Attn: Cross Country
1910 Hotel Plaza Blvd.
Lake Buena Vista, FL 32830

**Note: Please Print** 

	District:	Clu	b Number:		Age Divisio	on:	
	Coach's Name:			Pho	one#:		
	Address:						
	Team Placement at Division	District Meet:			ail: h Years		
	DIVISION	Distance		DII	ii Itais		
	Bantam	3K		1994	4 & After		
	Midget	3K		1992	2-1993		
	Youth	4K		1990	0-1991		
	Intermediate	5K			8-1989		
	Young	5K		-, -	6-1987*		
•	Athletes who are still eigh	hteen (18) years	of age, throug	gh the final c	lay of National Cross Co	untry Meet, shall be eligible to	compete in
	the Young Men's and Yo						7
		List Team			thletes listed may		
	Name	Birth	Place at	Male/	City, State	AAU#	
		Date	District	Female			
							-
							_
							-
							-
							<u> </u>
Pay	yment by credit card (	check one):					
	oVISA o MAS	TER CARD	o DIS	COVER	o AMERICAN E	EXPRESS	
Cre	edit Card Number:				Expiration	on Date:	
Na	me on Card (print):				Signature:		

#### ATHLETE WAIVER/RELEASE FORM ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in any Amateur Athletic Union of the U.S. Inc. activity ("Activity") I, for myself, my personal representatives, assigns, heirs, and next of kin: 1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if at any time I believe conditions to be unsafe, I will immediately discontinue further participation in the Activity. 2. FULLY UNDERSTAND that: (a) ATHLETIC ACTIVITIES INVOLVE RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("RISKS"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the condition in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS AND SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation or that of the minor in the Activity. 3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the Amateur Athletic Union of the U.S. Inc. (AAU), Southeastern AAU, the States of Tennessee, Kingsport Chamber of Commerce, Kingsport Convention and Visitors Bureau, its sponsors and suppliers, MeadowView Conference Resort and Convention Center, Cattails at MeadowView, the City of Kingsport, including its parent company and related affiliated and subsidiary companies of each, as well as the officers, directors, agents, employees and assigns of each, and the AAU's Associations, clubs, coaches, officials, administrators, members, volunteers, participants, sponsors, advertisers, and, if applicable, owners and lessors of premises on which the Activity takes place, and any other party indemnified and held harmless by the AAU, (each considered one of the "RELEASEES" herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS, NEGLIGENT SECURITY, TRAVEL, AND RECREATIONAL OPERATIONS AND ACTIVITIES; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Release's, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which any may incur as the result of such claim. Agreement to Participate

1 ,or we, grant to the Directors, Assistants, or assig			
treatment/hospitalization (including anesthesia) if ne			
facility. I understand that should a health emergency			
treatment as deemed necessary by competent medical	l personnel is authorized I hereby state	that to the best of my knowledge	the following information
is complete:			
PERSONAL PHYSICIAN'S NAME:	PHON	NE:	
PERSONAL PHYSICIAN'S NAME: I am presently taking the following medication or pill	ls:		
I am allergic to the following (medicine, bee/insect st	tings, other):		
I am allergic to the following (medicine, bee/insect st I hereby authorize the AAU to allow the reproduction	n, dissemination, and/or publication of my	name and likeness for media cov	erage, public relations, o
any other purpose which may involve the use of phot	ographs, films, and/or video tape recording	ng. This is to be done in conjuncti	on with my participating
in this AAU event and I understand and agree that I r	nay neither pay a fee to receive individua	l promotional consideration from	my participation in this
event, nor will I receive any payment for the possible	commercial use of my name or likeness.	INSURANCE: AAU membersh	ip provides excess
medical insurance for any member athlete participating	ng in an AAU-sanctioned practice or ever	nt. If the athlete has other medical	coverage, theirs will be
applied first, followed by AAU insurance. I HAVE I	READ THIS AGREEMENT, FULLY UN	DERSTAND ITS TERMS, UND	ERSTAND THAT I
HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SI	IGNING IT AND HAVE SIGNED IT FR	EELY AND WITHOUT ANY IN	DUCEMENT OR
ASSURANCE OF ANY NATURE AND INTEND I	T TO BE A COMPLETE AND UNCON	DITIONAL RELEASE OF ALL I	LIABILITY TO THE
GREATEST EXTENT ALLOWED BY LAW AND	AGREE THAT IF ANY PORTION OF T	THIS AGREEMENT IS HELD TO	D BE INVALID THE
BALANCE, NOTWITHSTANDING, SHALL CONT	TINUE IN FULL FORCE AND EFFECT	•	
PRINTED NAME OF <b>PARTICIPANT</b> :		PHONE:	
PARTICIPANT'S SIGNATURE (only if age 18 or			
MINOR RELEASE; AND I, THE MINOR'S			
ACTIVITIES AND THE MINOR'S EXPERIENCE			-
AND IN PROPER PHYSICAL CONDITION TO P	'ARTICIPATE IN SUCH ACTIVITY. I	HEREBY RELEASE, DISCHA	RGE, COVENANT NO
TO SUE, AND AGREE TO INDEMNIFY AND SA			,
DEMANDS, LOSSES, OR DAMAGES ON THE M	MINOR'S ACCOUNT CAUSED OR AL	LEGED TO BE CAUSED IN W	HOLE OR IN PART B
THE NEGLIGENCE OF THE "RELEASEES" OR	*		
THAT IF, DESPITE THIS RELEASE, I, THE MIN	· ·		
RELEASEES NAMED ABOVE, I WILL INDEMN			
EXPENSES, ATTORNEY FEES, LOSS LIABILITY			SUCH CLAIM.
PRINTED NAME OF <b>PARENT/GUARDIAN</b> :			
ADDRESS:			
(Street)	(City)	(State)	(Zip)
PHONE:	DATE:	` '	· · · · ·

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18):



National Championship Merchandise Can Only Be Pre-Ordered By Mail or Phone
These and Other Products Will Be Available at the Event.

Shop Online for Other Quality AAU Cross Country Apparel & Merchandise







SHOP ONLINE AT WWW.AAUSTORE.COM

# Official 2004 AAU Cross Country National Championship Apparel

•	2730 Carlisle NE Albuquerque, N		Fax (505) 872	2-0724 www.aau	store.com
				ZIP	
DAYTIME PHONE (	)	EVENING PHONE (	)		
E-MAIL ADDRESS					
ITEM NUMBER	DESCRIPTION		9	SIZES .	PRICE
A. AAU_CP04XC	2004 National Cham	npionship Visor	_		\$16.00
B. AAU_CP04XC		•			\$16.00
C. AAU_TS04XC	1 2004 National Cham	npionship Event Shirt	1	10/12 - 3XL	\$15.00
D. AAU_LS04XC	1 2004 National Cham	npionship Long Sleeve	1	10/12 - 3XL	\$20.00
E. AAU_HD04XC		npionship Hooded Swe Per Shirt For 2XL, \$4 for 3		14/16 - 2XL	\$35.00
FOR THESE AND OTHE	R PRODUCTS, PLEASE VISIT OUR			ISHIPS IN KINGSP	ORT, TENNESSEE
ITEM NUMBER	ITEM DESCRIPTION		SIZE	QUANTITY	PRICE
Mail Completed Form to:	Zia Graphics		<u> </u>	Subtotal	
	2730 Carlisle NE Albuquerque, NM 8	7110		\$2 Per 2XL \$4 Per 3XL	
	Or Fax Form to:	(505) 872-0724		Shipping	\$5.00
	Or Call Us Toll-Free at:	(888) 994-7274		Grand Total	
Method of Paymer ☐ Visa	nt: □Mastercard □American Exp	oress	ke Check Pay	able to Zia Grap	hics)
Card Number			_ Expira	tion Date	
Signature					

ORDER FORMS MUST BE RECEIVED NO LATER THAN NOVEMBER 15, 2004.

## **RSVP LUNCH FORM**

We have catered lunches available for runners, coaches and their families. Reservations required!

#### Reservation must be received by November 19, 2004.

## **MENU Choices:**

- 1. Ham Sandwich, Chips, Fruit, Cookie, Beverage \$7.00
- 2. Chick-fil-A Chicken Sandwich, Chips, Fruit, Beverage \$7.00

Meal tickets can be picked up the day of registration, December 3, 2004, between 11:00 a.m. and 3:00 p.m. in Convention Center B.

Checks should be for the total amount of meals and should be made payable to:

Kingsport CVB

Mail reservations to: Kingsport CVB 151 East Main Street Kingsport, TN 37660

Meals C	an be picked up outside the Cattails Clubhouse on the day of race.
	YES, I would like to order:
	Ham Sandwich Meal(s) at \$7.00 per meal
	and/or
	Chicken Sandwich Meal(s) at \$7.00 per meal
	Enclosed is my check for \$

(Please print name here for meal ticket pick up)

## **RSVP PASTA DINNER FORM**

#### **Reservations required!**

#### Reservation must be received by November 19, 2004.

#### **DINNER MENU:**



Spaghetti Bread Salad Dessert Drink



#### **COST:**

\$10.00 (Ages 13 and Up) \$8.00 (Ages 5 – 12) Free (Ages 4 and Under) Prices include sales tax and gratuity.

Meal tickets can be picked up the day of registration, December 3, 2004, between 11:00 a.m. and 3:00 p.m. in Convention Center B.

# Checks should be for the total amount of meals and should be made payable to: Kingsport CVB

Mail reservations to: Kingsport CVB 151 East Main Street Kingsport, TN 37660

Dinner will be served by Wright's Catering the day of registration, December 3, 200 between 5:00 p.m. and 8:00 p.m.		
YES, I would like to order:		
Adult Meal(s) at \$10.00 per meal		
Child Meal(s) at \$8.00 per meal		
Children 4 & Under Meal(s) - Free		
Enclosed is my check for \$		

(Please print name here for meal ticket pick up)

#### **HOUSING RATE SHEET**

#### 2004 AAU YOUTH CROSS COUNTRY NATIONAL CHAMPIONSHIP

December 2 (early arrival) – December 5, 2004 (late stays)
Actual Tournament Date: December 4, 2004

Below rates DO NOT include local sales and occupancy taxes (approximately 141/2%)

#### PLEASE CHECK OUR WEBSITE FOR ADDITIONAL PRICING INFORMATION: www.king-sport.org

#### **Kingsport Hotels**

Comfort Inn - KPT Price: \$72.00

100 Indian Center Court - 37660

Phone: (423) 378.4418

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, Jacuzzi health spa, cable TV, HBO, meeting room, located near shopping, restaurants, and theatres, all major credit cards accepted.

Comfort Inn I-81 - KPT

Price: \$54.99

4624 Fairlane Drive - 37663 Phone: (423) 239.7447

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, cable TV, HBO, elevator, located behind Perkins Restaurant which is open 24 hours, located near shopping, restaurants, and theatres, all major credit cards accepted.

Days Inn - KPT Price: \$55.00

805 Lynn Garden Drive - 37663

Phone: (423) 246.7126

Complimentary coffee, free local calls, outdoor pool,, cable TV, HBO, refrigerators, meeting room, on site restaurant, laundry facility, located near shopping, restaurants, and theaters, all major credit cards accepted.

Econo Lodge - KPT Price: \$70.00

1704 East Stone Drive - 37660 Phone: (423) 245.0286

Free continental breakfast, complimentary coffee, direct dial phone, free local calls, cable TV, HBO, refrigerators, located near shopping, restaurants, and theatres, all major credit cards accepted.

Hampton Inn - KPT Price: \$83.00

2000 Enterprise Place - 37660 Phone: (423) 247.3888

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, cable TV, HBO, exercise room, elevator, meeting room, voice mail, within three miles of shopping, restaurants, and theatres, all major credit cards accepted. Indoor Corridors

Jameson Inn - KPT Price: \$76.00

3004 Bays Meadow Place - 37660

Phone: (423) 230.0534

Free continental breakfast, complimentary coffee, direct dial phones, free local calls outdoor pool, cable TV, movie channels, all major credit cards accepted, exercise room, elevator, refrigerators, meeting room. Indoor corridors.

La Quinta Inn - KPT

Price: \$66.00

10150 Airport Parkway - 37663

Phone: (423) 323.0500

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, cable TV, HBO, pay per view movies, elevator, meeting room, all major credit cards accepted.

## MeadowView Conference Resort and Convention Center - KPT Price: \$82.00

1901 MeadowView Parkway - 37660

Phone: (423) 578.6600

Adjacent to Cattails at Meadowview – cross country course is on resort property. Complimentary coffee, direct dial phones, outdoor pool, lounge, restaurant, Jacuzzi health spa, cable TV, movie channels, pay per view movies, tennis courts, exercise room, elevator, refrigerators, gift shop, shuttle service, meeting rooms, within three miles of shopping, restaurants, and theatres, all major credit cards accepted. Indoor corridor.

Microtel - KPT Price: \$35.95

1708 East Stone Drive - 37660

Phone: (423) 378.9220

Complimentary coffee, free local calls, cable TV, movie channels, HBO, pay per view movies, elevator, located near shopping, restaurants, and theatres, all major credit cards accepted. All queen beds. Indoor corridor.

Ramada Inn - KPT Price: \$68.00

2005 La Masa Drive - 37660

Phone: (423) 245.0271

Complimentary coffee, free local calls, outdoor pool, lounge, cable TV, HBO, tennis courts, shuttle service, meeting rooms, located near shopping, restaurants, and theatres, all major credit cards accepted.

Red Carpet Inn - KPT

Price: \$50.00

9980 Airport Parkway - 37662

Phone: (423) 279.7111

Complimentary breakfast, direct dial phone, free local calls, located near shopping/restaurants/theatres, cable TV, HBO, All major credit cards accepted.

Sleep Inn - KPT Price: \$71.00

200 Hospitality Place - 37663 Phone: (423) 279.1811

Complimentary continental breakfast, complimentary coffee, Free local calls, located near shopping/restaurants/theatres, cable TV, HBO, elevator, meeting room, all major credit cards accepted

Super 8 - KPT Price: \$65.00

1238 Shipley Ferry Road - 37663

Phone: (423) 239.9137

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor poor, cable TV, All major credit cards accepted

Westside Inn - KPT Price: \$45.00

1017 West Stone Drive - 37660

Phone: (423) 247.2176

Complimentary continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, Jacuzzi room, cable TV; movie rental, all major credit cards accepted, refrigerators.

#### Johnson City Hotels \*\*25 Minutes From Course\*\*

Best Western - JC Price: \$79.00

2406 North Roan Street - 37601

Phone: (423) 282.2161

Free local calls, outdoor pool, refrigerators, cable TV, elevator, meeting room, located near shopping, restaurants, and theatres, all major credit cards accepted, Jacuzzi rooms, irons, hair dryers, suites, data ports.

Carnegie Hotel - JC Price: \$115.00

1216 West State of Franklin Road - 37604

Phone: (423) 979.6400

Complimentary coffee, direct dial phones, outdoor pool, lounge, two restaurants, Jacuzzi health spa, 32" cable TV, Nintendo game system, movie channels, pay per view movies, hospitality suite, exercise room, elevator, refrigerators, shuttle service, meeting rooms, located near shopping, restaurants, and theatres, all major credit cards accepted.

Comfort Inn Suites - JC Price: \$81.00

3118 Browns Mill Road - 37604

Phone: (423) 610.0010

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, cable TV, HBO, refrigerators, microwaves, hairdryers, iron & ironing boards, sleep sofas, exercise room, meeting room, elevator, located near shopping, restaurants, and theatres, all major credit cards accepted.

Doubletree - JC Price: \$69.00

211 Mockingbird Lane - 37604

Phone: (423) 929.2000

Complimentary coffee, outdoor pool, lounge, restaurant, cable TV, pay per view, game room, exercise room, elevator, refrigerators, shuttle service, meeting room, located near shopping/restaurants, indoor pool.

Hampton Inn – JC Price: \$71.00

508 N. State of Franklin - 37604

Phone: (423) 929.8000

Free continental breakfast, complimentary coffee, direct dial phones, free local calls, outdoor pool, cable TV, elevator, meeting room, voice mail, refrigerators

Holiday Inn – JC

Price: \$95.00

101 West Springbrook Drive - 37604

Phone: (423) 282.4611

Complimentary coffee Monday – Friday, direct dial phones, outdoor pool, lounge, restaurant, cable TV, movie channels, ShowTime, pay per view movies, hospitality suite, exercise room, elevator, refrigerators, gift shop, shuttle service, meeting room, located near shopping, restaurants, and theatres, all major credit cards accepted.

Jameson Inn - JC Price: \$69.00

119 Pinnacle Drive Phone: (423) 282.0488

Free continental breakfast, complimentary coffee, direct dial Phones, free local calls, outdoor pool, cable TV, movie channel, all major credit cards accepted, exercise room, refrigerators in some rooms, located beside Cracker Barrel, suites.

#### Bristol Tennessee Hotels \*\*20 Minutes from Course \*\*

Best Western - BT Price: \$60.00

111 Holiday Drive - 37620 Phone: (423) 968.1101

Free local calls, outdoor pool, restaurant, cable TV, movie channels, pay per view , all major credit cards accepted, exercise room, meeting room.

Hampton Inn - BT

Price: \$80.00

3299 West State Street - 37620

Phone: (423) 764.3600

Free local calls, complimentary coffee, direct dial phones, free local calls, outdoor pool, cable TV, movie channels, HBO, elevator, located near shopping, restaurants, and theatres, all major credit cards accepted.

# 3000 Course



4000 Course



# 5000 Course



# GOOD LUCK! WE'LL SEE YOU IN KINGSPORT!

