

The AAU is one of the largest, non-profit, volunteer youth sport organizations in the United States.

A multi-sport, event-driven organization, the AAU is dedicated exclusively to the promotion and development of amateur sports programs. AAU has multiple levels of competition.

The NY Metropolitan District AAU will host its second Indoor Invitational meet at the famed NYC New Balance Armory Track on Saturday, March 3, 2007 from 9am-1pm. All athletes are welcome. Avoid the lines and pre register for the Meet at www.coacho.com. *Pre-registration will end on February. 25th.*

Entry Fees:

Pre-2/26/07: AAU members- \$6.00/event

Relay (for all)- \$20.00/relay

Post- 2/27/07 and day of meet:

AAU members-\$8.00/event

Relay (for all) - \$28.00/relay

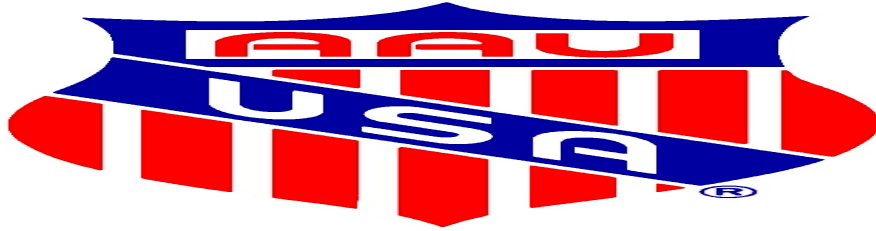
Become an AAU member by registering online at ausports.org or at the Armory on 3/3 from 8:00am-8:30 am.

AAU TRACK & FIELD OFFERS SINGLE AGE GROUP COMPETITION

If You Would liked to join a Year-round program that is committed to providing quality training to all athletes age 5-18, AAU has Track & Field programs based in your local area. For more information, contact B. Brown at

516-456-6552 or www.aauathletics@nymetropolitanaau.com

Athlete's Release: In consideration of your acceptance of my entry into the AAU-NY METROPOLITAN Pre-SPRING INVITATION, I voluntarily agree to participate in the AAU- NY METROPOLITAN Pre-SPRING INVITATION, and knowingly assume any and all risk of loss, damage, property loss, injury (including death), both foreseen and unforeseen, of my attendance at and participation in the AAU- NY METROPOLITAN Pre-SPRING INVITATION,, from any cause whatsoever. I, for myself, my heirs, personal representatives and assigns do hereby release, waive, discharge and covenant not to sue The Amateur Athletic Union, Inc., the local AAU Association and the owner or lessee of New Balance Armory Track in which the AAU-NY METROPOLITAN Pre-SPRING INVITATION, is held (collectively "Releases") 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 Invitation.

I/we grant permission to the Meet Directors or their designee or the assigned Chaperones of any **AAU- NY METROPOLITAN Pre-SPRING INVITATION**, competition or program to act as guardian/spokesman with full authorization and power to authorize emergency medical treatment, including hospitalization and anesthesia, if medically necessary, for my/our son or daughter while in route to/from or at the site of the **AAU- NY METROPOLITAN Pre-SPRING INVITATION**, competition or program. I/we understand that should a health emergency arise, I/we will be notified but if/we cannot be reached by phone such medical treatment as is deemed necessary by medical personnel under the circumstances presented is hereby expressly authorized.

ATHLETE - Print Name

Signature

PARENT / GUARDIAN Signature (Must be signed if athlete is under 18 years of age.)

Telephone: (_____) _____

Team Name: _____

Coach Name: _____

Please fax this completed form to: 516-338-8798, or
e-mail to AAUAthletics@NYMetropolitanAAU.com