



**28<sup>th</sup> ANNUAL HAYWARD CLASSIC**  
**USATF Northwest Region Masters Championships**  
**Presented by the Oregon Track Club Masters**



**June 26-27, 2010**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Sex: Male \_\_\_\_\_ Female \_\_\_\_\_ Age on June 26: \_\_\_\_\_ Birth Date: month \_\_\_\_\_ day \_\_\_\_\_ year \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Work or Cell: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_

**Events:** Put an **X** in the boxes of the events that you are entering

<b>Fill in 2010 Seed times for your 100, 200, 400 and 800</b>  <input type="checkbox"/> 100m _____ <input type="checkbox"/> 200m _____ <input type="checkbox"/> 400m _____ <input type="checkbox"/> 800m _____	<input type="checkbox"/> 1500 run	<input type="checkbox"/> hurdles 80/100/110	<input type="checkbox"/> long jump	<input type="checkbox"/> discus
	<input type="checkbox"/> 5000m run	<input type="checkbox"/> hurdles 200/300/400	<input type="checkbox"/> triple jump	<input type="checkbox"/> hammer
	<input type="checkbox"/> 10,000m run	<input type="checkbox"/> steeplechase	<input type="checkbox"/> high jump	<input type="checkbox"/> javelin
	<input type="checkbox"/> race walk 1 mile	<input type="checkbox"/> age graded mile (not a championship event)	<input type="checkbox"/> pole vault	<input type="checkbox"/> weight th
<input type="checkbox"/> race walk 5000m		<input type="checkbox"/> shot put	<input type="checkbox"/> superWt	

Yes, I will need ADA accommodation. Documentation must be submitted by April 26, 2010

USATF Association: \_\_\_\_\_ USATF Club \_\_\_\_\_

2010 USATF Registration Number \_\_\_\_\_ (available at [www.usatf.org](http://www.usatf.org))  
 (Required for American citizens)

**T- Shirts** (\$15.00 each)

S  M  L   
 XL  XXL

T- shirts are unisex and generously sized

**Payment:**

Make checks to OTCM and mail to:

Oregon Track Club Masters  
 c/o Ruth BreMiller  
 590 W 29<sup>th</sup> Avenue  
 Eugene, OR 97405

<b>Fees:</b>			
1 <sup>st</sup> Event	\$20.00	=	\$20.00
Number of additional events <input type="checkbox"/> X	\$10.00	=	
Number T-shirts <input type="checkbox"/> X	\$15.00	=	
Late Fee (if received after June 11 <sup>th</sup> )	\$25.00	=	
Voluntary contribution to the Officials' Fund			
Voluntary Meet Sponsorship			
	<b>TOTAL</b>	<b>=</b>	<b>\$</b>

**ALL ENTRIES MUST BE RECEIVED BY 5PM, Thursday, June 17th**

**Waiver:** In exchange for acceptance of this entry, I for myself, executors, administrators and assigns, do hereby release any rights and claims for damages to me or my property I may have against OTCM, USATF, USATF Oregon, University of Oregon, and any and all sponsors and individuals involved with the presentation and conduct of this meet. I hereby attest that I have full knowledge of the risk involved in competing in this event and am physically fit and sufficiently trained to participate in this event.

Signature \_\_\_\_\_ Date \_\_\_\_\_