



USA Track and Field Pacific Association COVID-19 VIRTUAL Race Walk Event Individual Results Report

ver. 4/19/2020

Event: USATF Pacific Association COVID-19 VIRTUAL Race Walk

Date _____ Event Start Time (Time of Day) _____

Distance _____ Finish Time (HH:MM:SS) _____

Location: _____

Event Notes (i.e., safety precautions taken, virtual judging calls/cards): _____

Last Name _____ First Name _____ Gender _____

Birth Date (MM/DD/YYYY) _____ Age on Event Date _____

City _____ State _____ Zip _____

Telephone # _____ E-mail _____

I know that race walking is a potentially hazardous activity. I should not enter and participate unless I am medically able and properly trained. I agree to abide by all federal, state, and local health and safety directives and guidelines related to the Coronavirus COVID-19 and my ability to safely compete in this virtual event. In consideration of the acceptance of my results, I do hereby, for myself, my heirs, executors and administrators, or anyone else who might claim on my behalf, waive, release and forever discharge any and all rights and claim for damages which I may have or which may hereafter accrue to me against The Pacific Association, USATF, its board of supervisors, officers, directors, agents, employees and volunteers, the race director and organizers, successors, and/or assigns; from any and all damages which may be sustained and suffered by me in connection with my said participation or arising out of my traveling to, participating in and returning from said event. I certify that the above results are true and correct to the best of my knowledge.

Signature: (Signature of parent or guardian if under 18 years of age.) _____

Date _____