## USA vs. Great Britain Multi-Event Challenge National Masters Decathlon/Heptathlon Championships

**Date:** July 5/6, 2014

Location: Neosho High School, 511 S. Neosho Blvd, Neosho, MO. 64850

Hosted by: Decamouse Track Club and Decathlon Mid-West

**Age Groups:** 30 and up (5 year age groups) We will accept Open athletes as well.

**Events Contested:** Competition will be held in men's and women's decathlon and women's heptathlon. USATF membership number required of all contestants.

Track Facility: Track is a quality high school facility. The javelin will be thrown off grass.

**Entry Fee:** The entry fee is \$90 for entries postmarked on or before June 27. Entry fee includes a s-shirt, a private fireworks display on Friday eve, Saturday pasta dinner, and an after meet reception on Sunday.

Questions: Questions can be addressed to: Tom Thorne, 417-455-3701, tphill525@att.net

Jim Shoemaker, 913-707-4037, jshoem22@gmail.com

Harry McDonald, 816-863-7580, biologycctrack@hotmail.com

Start times: Competition will commence both Saturday and Sunday at 9:00 A.M. and be contested with the oldest to youngest age divisions.

Detach here and mail to: Tom Thorne, 525 Oak Ridge Drive, Neosho, MO. 64850

Make checks payable to: Decathlon Mid-West

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Name	Birthdate//	Age as of 7/5/14	Gender	
Address	_City	_ State	Zip	
T-shirt size Email address	Phone/_	Amount encl	osed	
Estimated score (for potential seeding as part of the challenge)				

WAIVER: I understand that competing in a multi-event competition can be a potentially dangerous activity. I verify that I am physically fit and have trained for this competition. I assume all risks associated with running this event including, but not limited to fall, contact with other participants, all risks being known and appreciated by me. Having read this waiver and knowing these facts and in consideration of your accepting my entry, I, for myself and anyone entitled to act in my behalf, waive and release USATF-Wisconsin, Decamouse Track Club, Decathlon Mid-West Track Club, Neosho Schools, and all sponsors and officials from all claims of any kind arising out of my participation in the above track meet. I grant full permission to use photos/records of these events. I grant permission for emergency medical treatment by competent medical personnel on the indicated date. List allergies and current medications (if any)

Signature	Emergency phone number/ Date//_