



For More Information please contact us at [\(808\) 956-2143](tel:8089562143) or [TheManoaMile@gmail.com](mailto:TheManoaMile@gmail.com)

**Saturday**  
February 6<sup>th</sup>, 2010

---

University of Hawai'i Manoa  
Lower Campus

---

First Race Starts 8:00 AM

---

Packet Pick-Up on:

FRI - Feb 5<sup>th</sup> 3:00pm – 7:00pm  
SAT - Feb 6<sup>th</sup> 6:30am – 7:45am

---

Clarence T.C. Ching  
Athletics Complex

The University of Hawai'i Women's Track and Field program will be holding their inaugural Manoa Mile as a fundraiser. During its short time in the NCAA, the University of Hawai'i Women's Track and Field team has achieved national recognition including several All-American Honors. It is our hope that you will join us and have a fun and active experience at the University of Hawai'i Manoa Campus.

The Mile course will be held on the Lower Campus of the University of Hawaii at Manoa. The Mile long race will start on Lower Campus Road, and finish at the track in the Clarence T.C. Ching Athletics Complex. Each Mile race will be divided into various categories with a 400m 'Rubba Slippa' race to conclude the day's events. The winner of each race (including the "Rubba Slippa" race) will receive a Champion's T-shirt. Packet-Pick up for all participants will be at the Clarence T.C. Ching Athletics Complex on Friday February 5<sup>th</sup> from 3:00pm – 7:00pm and Saturday February 6<sup>th</sup> from 6:30am – 7:45am

Name: \_\_\_\_\_

Company (for Corporate Entries): \_\_\_\_\_

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

Email: \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

Sex (circle one) 

Male	Female
------	--------

 D.O.B (mm/dd/yy) / /

T-Shirt Size (circle one) 

XS	S	M	L	XL	2XL (+ \$2.00)
----	---	---	---	----	----------------

\*\*Please be sure to get your form to us by January 30<sup>th</sup> to guarantee your T-Shirt

WAIVER/RISK & RELEASE STATEMENT: I/We, the undersigned, certify that I (or the above named child) am/is in good physical health and able to participate in all activities of the above named program. I/We, also understand and acknowledge that there are inherent dangers and risks involved with participation in the above named program which include but are not limited to *dangers that can range from minor injuries such as bruises, lacerations, strains, and sprains to serious catastrophic injuries, including permanent disability and death, as well as property loss & severe economic and social losses. These risks include, but are not limited to, those caused by (a) the actions, omissions or negligence of coaches, participants, competitors, volunteers, spectators; (b) conditions of the premises or equipment used; (c) rules of competition; (d) temperature; (e) weather; and (f) conditions of participants or competitors* I/We, understand that I should be covered during the **DATES OF THIS EVENT (February 6<sup>th</sup>, 2010)** by a private medical and liability policy; and I/We further understand that the University of Hawai'i does not provide such insurance or otherwise indemnify individuals with respect to injuries or other liabilities arising out of participation in the above named program. Therefore, in consideration of my being permitted to participate in the above named program, I/We hereby agree to assume all risks and responsibilities surrounding my (or my child's) participation in the above named program. I/We have read and understand any and all written materials setting forth the requirements for participation in the above referenced activity, as well as those explained by the instructor(s), and I agree to strictly observe them. Further, I/We do for myself (or my child), my heirs, executors and administrators hereby accept full responsibility for my participation and agree to indemnify, release and discharge the University of Hawai'i Foundation, University of Hawai'i, State of Hawai'i, its officers, employees, agents and assigns from any and all claims for actions for property damage, personal injury, and/or death arising from such participation in the above named program or growing out of or causes by any acts or omissions during my participation in the above named program.

Print Name \_\_\_\_\_ Signature (of Parent/Legal Guardian) \_\_\_\_\_ Date \_\_\_\_\_

Please Enter Me In:			
<input type="checkbox"/> Manoa Mile (Student) \$15*	<input type="checkbox"/> Manoa Mile (Non-Student) \$20.00*	<input type="checkbox"/> Manoa Mile (Corporate) \$100* ** Enter a team of 5 with the Top 3 to score. You will be contacted for Names and T-Shirt sizes.	<input type="checkbox"/> "Rubba Slippa" Race \$5*

\* A portion of this amount is Tax Deductible

Enclosed is my check made payable to: UH Foundation/Women's Track and Field in the amount of: \$ \_\_\_\_\_.

Please Charge \$ \_\_\_\_\_ to my:  Visa  Mastercard  American Express  Discover

Name as it appears on card: \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp Date: \_\_\_\_\_ Signature: \_\_\_\_\_

I cannot attend, but please accept my donation of \$ \_\_\_\_\_ to the Women's Track and Field Program.

**Mail completed form to: The Manoa Mile, ATTN: Women's Track & Field, 1337 Lower Campus Road, Honolulu, HI 96822; or fax form to: (808) 956-4504**