



2012 SUNSET MEET SERIES

Schedule of Events:

Sunset Meet # 1		Saturday - January 21, 2012
Sunset Meet # 2	Dr. Donnis Thompson Memorial Meet	Saturday - February 04, 2012
Sunset Meet # 3	Terry Albritton Memorial Meet	Saturday - February 18, 2012
Sunset Meet # 4		Saturday - April 14, 2012
Sunset Meet # 5		Saturday - April 28, 2012

All track events, horizontal jumps, vertical jumps, shot put and weight throw will be held at the Clarence T.C. Ching Athletics Complex. Long throws (Hammer, Discus and Javelin) will be held on the lower grass practice field located diamond head/mauka of the track facility.

Meet Schedule (subject to change)

	Sunset # 1	Sunset # 2	Sunset # 3	Sunset # 4	Sunset # 5
1:15 pm	Registration Opens				
	Field Events				
2:00 pm	Pole Vault	Pole Vault	Pole Vault	Pole Vault	Pole Vault
	Hammer	Hammer	Hammer	Javelin	Javelin
3:00 pm	Long Jump	Long Jump	Long Jump	Hammer	Hammer
		Javelin	Discus	Long Jump	Long Jump
4:00 pm	Weight Throw	Weight Throw	Weight Throw	Discus	Discus
	High Jump	High Jump	High Jump	High Jump	High Jump
4:30 pm			Triple Jump		
5:00 pm	Shot Put	Shot Put	Shot Put	Shot Put	Shot Put
	Triple Jump	Triple Jump		Triple Jump	Triple Jump
	Track Events				
4:00 pm	60mH	60mH	60mH	100mH/110mH	3000m SC
4:20 pm	60m	60m	60m	1500m	100mH/110mH
4:30 pm	600m	Mile	400m	100m	4 x 100m
4:45 pm	150m	200m	Mile	2000mSC	4 00m
5:00 pm	3000m	800m	200m	200m	1500m
5:20 pm	300m	400m	800m	400mH	100m
5:45 pm	1000m	5000m	3000m	800m	400mH
6:00 pm	-	4 x 400m	4 x 400m	4 x 100m	800m
6:15 pm	-	-	-	5,000m	200m
6:30 pm	-	-	-	400m	3000m
7:00 pm					4 x 400m

Please note that All UH Sunset Meet Series are run on a **rolling schedule**. This will mean that all start/event times will be subject to change during the day of the meet. Please ensure that you arrive well before your suggested start time as we will run ahead or behind schedule depending on



the number of participants. Events can also be cancelled if there are too few participants. The decision to cancel will be made prior to the start of the event.

Entry Procedures

Entries are to be completed on the day of the competition. Participants will be permitted to enter an event 30 minutes prior to the start of each event. Registration will open 45 minutes prior to the first schedule event (see Meet Schedule above). Registration will close 30 minutes prior to the last event of the meet. All participants must complete a Risk & Release form prior to competing in their chosen events. If the participant is under 18 years of age, the Risk and Release form will need to be completed by a parent or legal guardian. In the case of a legal guardian, please bring documentation to certify the relationship.

Entry fee into all of the Sunset Meet Series will be free, however a donation to our Foundation would be greatly appreciated. University of Hawai'i students may participate at no cost with proof of a validated UH student ID. All groups (schools/clubs) can negotiate a group fee with the meet director.

Participants must fill out a registration card for each event they choose to enter. These cards will be used for competition. All cards must be filled out clearly as un-readable cards may lead to errors with results reporting.

Meet Information

All meets are run on a running schedule, meaning that all event start times are subject to change based on the number of participants..

If there is a lack of participation in a particular event, the event may be cancelled before or during the meet. If your event is cancelled, please bring your card back to the registration tent for a refund for that particular event.

Track Events. Upon registering for a track event, participants will be asked to indicate an estimated performance time or "seed mark". This will ensure that you are grouped with other participants of similar ability. Ability level and not your age or gender will be the deciding factors in race sections. Please ask event staff for help if required. It is the responsibility for each participant to be aware of changing start times and listen for marshalling calls to report to the start of their event.

Field Events. For all throws and horizontal jumping events, participants will receive 4 attempts. Participants will be required to report to event site at least 15 minutes prior to the start of the event. Warm-Ups will be closed 2 minutes prior to the start of the event. Please see schedule for approximate start times.

Restrictions

We reserve the right to refuse entry to athletes who present a danger to themselves, other participants and meet staff.

Regarding Vertical Jumps. Please indicate to the event staff and/or officials of your starting height at least 10 minutes prior to the start of the event.



Regarding Pole Vault. In order to compete in the Pole Vault event, you must have a coach present, and you must provide your own poles. Poles will not be provided by the meet or home institution.

Regarding Throws. In the Hammer, Weight Throw, Javelin, Discus and Shot Put events, participating athletes must have prior experience and a basic technical understanding of the event and its rules. Participants must follow all instructions set forth by meet staff and officials.

Regarding Triple Jump/Long Jump: Horizontal jumpers who are unable to use the set take-off boards will be responsible for using their own tape to mark their take-off board. It is the responsibility of the participant to notify meet staff and officials of their temporary take-off mark.

Results

Results will be posted on HawaiiAthletics.com on the Track & Field webpage no later than Monday after the meet.

Questions?

If you have any questions, please contact Thea Belgrave at altheab@hawaii.edu





Sunset Series Meet Risk & Release Form
(please read and print clearly)

Name of Participant : (Last) (First) (M.I.)

Dates of Program : January 21, 2012 to May 08, 2012

FOR CHILDREN (TO BE SIGNED BY PARENT OR LEGAL GUARDIAN)

I/WE, CERTIFY THE ABOVE NAMED CHILD 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 WITH THE UNIVERSITY OF HAWAII WHICH INCLUDE BUT ARE NOT LIMITED TO: DANGERS 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.

THEREFORE, IN CONSIDERATION OF ABOVE NAME CHILD BEING PERMITTED TO PARTICIPATE IN THE ABOVE NAMED PROGRAM, I/WE HEREBY AGREE TO ASSUME ALL RISKS AND RESPONSIBILITIES SURROUNDING MY CHILD'S PARTICIPATION IN THE ABOVE NAMED PROGRAM. I 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/WE AGREE TO STRICTLY OBSERVE THEM.

Print Name (Parent/Legal Guardian) Signature Date

FOR ADULTS (TO BE SIGNED BY ALL PARTICIPANTS)

I, CERTIFY THAT I AM IN GOOD PHYSICAL HEALTH AND ABLE TO PARTICIPATE IN ALL ACTIVITIES OF THE ABOVE NAMED PROGRAM. I, ALSO UNDERSTAND AND ACKNOWLEDGE THAT THERE ARE INHERENT DANGERS AND RISKS INVOLVED WITH PARTICIPATION IN THE ABOVE NAMED PROGRAM WITH THE UNIVERSITY OF HAWAII WHICH INCLUDE BUT ARE NOT LIMITED TO: DANGERS 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.

THEREFORE, IN CONSIDERATION OF MYSELF BEING PERMITTED TO PARTICIPATE IN THE ABOVE NAMED PROGRAM, I HEREBY AGREE TO ASSUME ALL RISKS AND RESPONSIBILITIES SURROUNDING MY PARTICIPATION IN THE ABOVE NAMED PROGRAM. I 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.

Print Name (Parent/Legal Guardian) Signature Date

MEDICAL CONSENT

I/WE, THE UNDERSIGNED, CONSENT TO AND AUTHORIZE ANY MEDICAL PROFESSIONAL AND OTHERS WORKING UNDER THEIR SUPERVISION TO TREAT MYSELF OR THE ABOVE NAMED CHILD FOR ANY INJURY OR ILLNESS ARISING FROM OR RELATED TO MY PARTICIPATION IN THE ABOVE NAMED PROGRAM.

I/WE FURTHER AGREE TO PAY ANY AND ALL MEDICAL EXPENSES, COSTS AND OTHER CHARGES AND TO RELEASE AND DISCHARGE AND HOLD HARMLESS THE UNIVERSITY OF HAWAII, STATE OF HAWAII, ITS OFFICERS, EMPLOYEES, AGENTS AND ASSIGNS FROM AND AGAINST ANY LIABILITY OR ANY CLAIMS OR DEMANDS ARISING FORM OR CONNECTED WITH SUCH MEDICAL TREATMENT OR CARE.

EMERGENCY CONTACT

Table with 2 columns: NAME, PHONE. Rows for 1st Person To Contact, 2nd Person To Contact, Physician To Contact.

Print Name (Parent/Legal Guardian) Signature Date