2025 Team Waco

Youth Summer Track & Field

Early Registration (\$75): March 3 to May 9 Late Registration (\$90): May 12 to May 16



ATHLETE FEES

Registration fees will cover the cost of each athlete's T.A.A.F. (Texas Amateur Athletic Federation) registration, Team Waco shirt and training. Payment may be paid at the City of Waco Parks and Recreation Department's Athletics Office, located at 3113 Clay Avenue, or by calling (254) 750-5875. All fees must be paid no later than May 23, 2025.

Team Waco will participate in several track meets throughout the season, at which each athlete will be required to pay \$5 to enter and participate in an unlimited number of events. During the regional meet, athletes will be required to pay \$10 for each event they wish to enter. Regional fees must be paid before the athlete can participate at the regional meet. Athletes who advance from the regional meet will compete in the 2025 T.A.A.F. Games of Texas State Meet, scheduled to take place July 31- August 3 in Bryan/College Station.

T.A.A.F. ELIGIBILITY

6 and under: 2019, 2020 10 and under: 2015, 2016 14 and under: 2011, 2012 *18 and under: 2007, 2008

8 and under: 2017, 2018 12 and under: 2013, 2014 16 and under: 2009, 2010

*Eligibility for the 18 and under division:

- Senior and high school students who have not competed at the college level in any track and field competition
- Individuals who completed high school in the spring of the most recent school term and were not 19 years of age or older on or before September 1 of the most recently completed school term and have not competed at the college level in any track and field competition

REQUIREMENTS

Before the athlete will be allowed to practice and compete with Team Waco, the following items must be submitted:

- 1. Copy of birth certificate
- 2. All City of Waco and T.A.A.F. participation and release forms. These must be completed each year.
- 3. Registration fee

PARENT MEETINGS (HART-PATTERSON TRACK AND FIELD COMPLEX, 3113 CLAY AVE.)

- When: Tuesday, May 20, 2025 at 6 p.m.
- Where: Hart-Patterson Track & Field Complex, 3113 Clay Ave.

TEAM RULES & POLICIES

- 1. Participants should make an honest effort to be at every practice.
- 2. Participants must sign in every day when attending practices.
- 3. Relay teams are determined by the coaches. Participants should inform their coach if they are interested in joining a relay team.
- 4. Participants must always be réspectful when visiting other meets. Athletes represent thé City of Waco and should demonstrate pride in themselves and their community.
- 5. Disrespectful behavior toward coaches, volunteers or teammates will not be tolerated and is grounds for removal from Team Waco. If a participant is removed from the program for disciplinary reasons, no refunds will be given.
- 3113 Clay Ave., Waco
- teamsideline.com/waco
- athletics@wacotx.gov
- **(254)** 750-5875
- Hours: M-F, 8:30AM 4:30PM



City of Waco

Team Waco Youth Summer Track & Field PARENTAL CONSENT AND RELEASE

Child's Name (Legal):			Date of Birth:							
Child's Preferred Name:				_ Child's Gender: Mal					le Female	
Child's Shirt Size (circle one): YOUTH: XS										
Parent(s)/Legal Guardian(s) Name(s):										
					Zip Code:					
Telephone Number(s):	Email:									
I, the undersigned, hereby release and ho liability in connection with the Team Wac locations in the City of Waco and the state	o Youth Sun	•								
This is to release the City of Waco, Texas, it or damage with respect to the above-design				•		•	•			
I, therefore, understand that the City of V equipment and training for the above-dest that the City of Waco is not to be held r designated minor during the time he/she i discharges the City of Waco, it officers and whether arising from the negligence of as whether or not connected with or contract signing below, I also grant to the City of Waco, I also grant to the City of Waco	ignated mind esponsible foils is participating I employees, ny City of Wa ted with by tl	or in conjunctor any act, ending in the property of the property of the contract of the contra	erro erro grar d al r en	n with r, omi m or a l futui nploy in cor	issic activ re lia ee c	e abo on, o vity a abilit or th	r incion nd that y white neg	ated p dent in at the ch ma ligenc the pro	rogram/activity, and nvolving the above- undersigned hereby y be caused or arise, e of any third party, ogram or activity. By	
Signed:(Parent or Legal Guardian)				Da	te:_					
(Parent or Legal Guardian)										
IN CASE OF EMERGENCY, PLEASE NOTIFY Name:								_		
Relationship:Home/Cell Phone:										
Address:										
Doctor's Name:										
Doctor's Address:										
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