

# 2008 Heart of America Police and Fire Games

Official Entry Form - Deadline August 1, 2008

**PLEASE READ ALL INSTRUCTIONS, PRINT CLEARLY AND RETURN THIS FORM WITH YOUR ENTRY FEE (NO CASH).**

All information provided on this application is held in confidence. Our mailing list is not sold or given out.  
Registration is a one time flat fee of \$50 per participant for one or multiple sports in both team and individual events.

SOCIAL SECURITY NO: _____ - _____ - _____	DATE OF BIRTH: _____	SEX: _____
LAST NAME: _____	FIRSTNAME: _____	MI _____
HOME ADDRESS: _____	CITY _____	ZIP: _____
EMPLOYER: _____	WORK #: (_____) _____	
HOME #: (_____) _____	CELL #: (_____) _____	E-MAIL: _____
COUNTY YOU LIVE IN: _____	SHIRT SIZE: (circle one) S M L XL XXL XXXL	
YOUR AGE ON September 18, 2008: _____		

## CHECK THE BOX THAT APPLIES TO YOUR EMPLOYMENT STATUS

<input type="checkbox"/> Police Dept. (sworn full-time)	<input type="checkbox"/> Federal (sworn full-time)	<input type="checkbox"/> Firefighter (certified full-time)
<input type="checkbox"/> Sheriff's Office (sworn full-time)	<input type="checkbox"/> State (sworn full-time)	<input type="checkbox"/> Retired Sworn (law/fire)
<input type="checkbox"/> Correctional Officer (certified full-time)	<input type="checkbox"/> Reservist I	<input type="checkbox"/> Guest (permission required)

If there are not enough entries in my age classification I will move to the next lower age: Please initial: YES \_\_\_\_\_ or NO \_\_\_\_\_

If there are not enough entries in my weight class I will move one class higher: Please initial: YES \_\_\_\_\_ or NO \_\_\_\_\_

**RELEASE OF LIABILITY: \*\* READ AND SIGN\*\*** For and in consideration for granting permission to participate in the 2008 Heart of America Police and Fire Games being held in Wichita, KS, September 18-21, 2008, the undersigned hereby releases the Kansas Police and Fire Athletic Association, it's officers, directors, employees, contractors, agents and all persons or organizations connected with or attending the Games or its events, from liability for damages arising out of any sort or nature suffered by the undersigned by reason of his participation in any of the activities of the 2008 Kansas Police and Fire Athletic Association (dba Heart of America Police and Fire Games).

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**UNSPORTSMANLIKE CONDUCT: \*\*READ & SIGN\*\*** It is emphasized that unsportsmanlike conduct WILL NOT BE TOLERATED. Complaints from the officials/referees will be given the highest priority and consideration in any disciplinary action by the executive board. If in the opinion of the Heart of America Police and Fire Executive Board, a competitor has displayed excessive or abusive unsportsmanlike conduct on the playing field, he/she will be subject to elimination from the Games for the time deemed appropriate for the violation. I have read and understand the Kansas Police and Fire Athletic Association rule regarding unsportsmanlike conduct and agree to abide by any decision in this regard.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**IDENTIFICATION AGREEMENT: \*\*READ & SIGN\*\*** I am aware that registration is mandatory at the Best Western Airport Inn and Convention Center Hotel before my first event and at the time I register I must present my Official PHOTO Department Identification. At registration I will be issued a color-coded wrist band and I understand that I must put the wrist band on and keep it on until my last event is completed.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**Will you be attending the Welcoming Party? Yes \_\_\_\_\_ (how many? \_\_\_\_\_) No \_\_\_\_\_**

Welcoming party dinner is **NOT** part of the \$50 registration fee and is added to overall fees!

MAIL APPLICATION TO: **KPFAA  
560 Westshore Dr.  
Wichita, KS 67209**

PRINT NAME: \_\_\_\_\_ AGE: \_\_\_\_\_

**INDIVIDUAL SPORTS AND SPORTS WITH DOUBLES PARTNERS**  
 List the event codes, describe the event, and write in the fee amount.

**EVENT SPORT/EVENT DOUBLES PARTNER FEES**  
**CODE DESCRIPTION (name) if applicable**

Event Code	Sport/Event Description	Fees
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

**TEAM SPORTS:** Basketball, Softball & Flag Football

Sport Code	Description	Team Name	Coach
1.			
2.			
3.			
4.			

In this section of the application please list your relay team members' names for the track, triathlon, bowling, and TCA competitions. Use additional paper if needed.

EVENT CODE	MEMBERS' LAST NAMES		
1)	1)	2)	3)
2)	1)	2)	3)
3)	1)	2)	3)
4)	1)	2)	3)

Participant - do you have a side business and looking to advertise? The KPFAA will be putting together a Police and Firefighter off duty Business Directory. If you are a participant in the games, for an additional \$25 we will advertise your business for you and make you an honorary member of the KPFAA. All directories will be online and supporting businesses and KPFAA members will have online access to this directory. Non-participants of the games will be able to advertise for \$50. If a non-participant joins the KPFAA for \$25, we will advertise for them as a complimentary service for joining the KPFAA.

Name: \_\_\_\_\_ Contact Number: \_\_\_\_\_

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

Business Name: \_\_\_\_\_ Service You Provide: \_\_\_\_\_

Occupation & Years of Service: \_\_\_\_\_

<p><b>Method of payment (circle one):</b>    <i>Check Enclosed</i>    <i>Visa</i>    <i>MasterCard</i>    <i>AmericanExpress</i></p> <p>Credit Card Account Number: _____ Expiration Date: _____</p> <p>Cardholder's Signature: _____ Total amount of fees: \$ _____</p>
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