



March 30, 2023

Dear Coach,

Here's the registration packet for the **Annual CYO Grade School Track & Field Meet on Saturday, May 20, 2023 at Hope Academy, 721 S. Washtenaw Ave. (Chicago, IL). Check-in** will begin at **7:45am** and the **meet will start at 8:30am. You must set up an account with Athletic.net and enter athletes into their 4 events NO LATER THAN MONDAY, MAY 15th** Athletes may participate in **FOUR (4) events ONLY (relays count as 1 event)** in their division. **Each event is limited to 5 athletes / div., except 800, 1600, Long Jump & Shot Put.**

6th Grade & Under

100 Meter (limit 5)
200 Meter (limit 5)
400 Meter (limit 5)
800 Meter (unlimited)
4 x 100m Relay (limit 2 teams)
4 x 200m Relay (limit 2 teams)
4 x 400m Relay (limit 2 teams)
High jump (limit 5)
Long jump (unlimited)
Shot Put (unlimited)

7th & 8th Grade

100 Meter (limit 5)
200 Meter (limit 5)
400 Meter (limit 5)
1600 Meter (unlimited)
4 x 100m Relay (limit 2 teams)
4 x 200m Relay (limit 2 teams)
4 x 400m Relay (limit 2 teams)
High jump (limit 5)
Long jump (unlimited)
Shot Put (unlimited)

COACH REQUIREMENTS: Anyone who wishes to Coach at the CYO Meet **must complete the following requirements by Monday, May 15, 2023.**

- **VIRTUS (Catholic schools ONLY)** - http://www.virtusonline.org/virtus/reg_0.cfm?theme=0
Virtus is **FREE** and is currently offered **online OR** as a **3 hour, LIVE class**
- **Coaching Coaches** - <http://els.coaching-coaches.com/user/register?regcode=chiarch>
This **2 hour, online course** reinforces the principle of "Coach as minister"; **costs \$20**
NOTE: Play Like A Champion, Positive Coaching Alliance and ASEP courses also meet the requirement.
- **Concussion** - <http://www.cdc.gov/headsup/youthsports/training/index.html>
Per the *Youth Sports Concussion Safety Act*, this **FREE** course is **Mandatory** for all coaches in Illinois.

NEW INFO: The cost for the CYO Meet is **\$200 per parish (up to 20 athletes) and \$300 (21 athletes or more)**. Each parish is required to bring at least **2 volunteers** to help with the meet.

If you have any questions, contact me at **(312) 491-3534** or williamsk4@maryvilleacademy.org.

Sincerely,

Kimberly Williams
Coordinator, Athletics

MARYVILLE/CYO • 1658 W. Grand Avenue • Chicago, Illinois 60622
PH (312) 491-3534 • FAX (312) 491-3531 • williamsk4@maryvilleacademy.org

*** IMPORTANT MEET INFORMATION ***

The **link with instructions for creating your Athletic.net online account** is listed below. Once you have an account, you'll be able to input your rosters and enter athletes into their events, starting April 20th.

NOTE: If you attended the 2022 CYO Track or CYO Cross Country Meets, the Windy City meets @ Hope Academy, or any other meet that uses Athletic.net, then you already have an account.

Athletic.net will send invitations to each school with an account. You will enter the **athlete and their times** into **FOUR (4) events ONLY**. Track events will be seeded based on the times you enter for your athletes. When you input athletes into **Field events - do not enter distances** because the field events aren't seeded. Coaches will receive a spread sheet for all events via Athletic.net. **WRITE each athlete's event info on their bib / sticker BEFORE ARRIVING AT THE MEET.** This will allow the stagers to set up the heats quickly.

All races are FINALS! Starting blocks can be used for the 3 fastest 100m & 200m heats ONLY.

Parking in the school lot is \$10/car (Coaches are FREE). North Lots & street parking is free.

IMPORTANT DEADLINES FOR THE CYO MEET:

- 1) **Create an online account with Athletic.net**
https://support.athletic.net/article/2ngw43npwr-creating-your-account-on-athletic-net?utm_campaign=header&utm_source=header&utm_medium=search
- 2) **Enter your roster & put athletes in events (include their Times) starting April 20th**
https://support.athletic.net/article/g3l6e4jp3z-uploading-a-roster?utm_campaign=header&utm_source=header&utm_medium=search
 - **Enter ONLY 4 events for each athlete (relays count as an event)**
 - For each event, **enter the athlete's fastest time** for this season
 - DO NOT enter distances for field events (no seeding necessary)
- 3) **FINAL DAY TO EDIT YOUR ROSTERS & EVENTS IS BY MONDAY, MAY 15th at 11:59PM**
 - **Last day to add athletes or switch athletes to a different event**
 - If athletes drop, there's no need to update after this date
 - **Remember, each athlete gets 4 EVENTS ONLY, including relays!**
 - **NO ON-SITE REGISTRATION WILL BE ALLOWED!**
 - **If schools & athletes aren't in Athletic.net, they CANNOT participate.**
 - Seeding & heating for the races will be completed on May 16th
- 4) **EMAIL CYO to CONFIRM # of Athletes AND Volunteers on TUESDAY, May 16th**
 - Volunteers can choose where they'd like to work
 - Starter = 1-2 pp; Race Stagers = 4 pp; High Jump = 3 pp; Long Jump = 3-4 pp; Shot Put = 3-4 pp; Hip Number Clerks = 3 -4 pp
- 5) **USE TEAM SPREAD SHEET TO WRITE HEAT INFO ON BIBS / STICKERS BY MAY 18th**
 - **Track events:** write athlete's Name, School, Events w/ Heat & Lane for each
 - **Field events:** write the athlete's Name, School & Division (JV Boy, JV Girl, etc.)

NO NEW ACCOUNTS / REGISTRATIONS ACCEPTED AFTER MONDAY, MAY 15th @ 11:59PM

VOLUNTEERS ARE ESSENTIAL TO THE SUCCESS OF THE CYO TRACK MEET.
Without enough volunteers, we must eliminate field events!



2023 C.Y.O. TRACK & FIELD MEET

TEAM REGISTRATION FORM

SCHOOL: _____

COACH'S NAME: _____

ADDRESS: _____

CITY: _____ **ST** _____ **ZIP** _____

CELL # () _____ **ALTERNATE # ()** _____

Email: _____

VIRTUS Certification Date: _____ (Attach copy of certificate)

Concussion Certification Date: _____ (Attach copy of certificate)

Coaching Coaches Certificate #: _____ (Attach copy of certificate)

OR

PLAC / P.C.A. / ASEP: _____ (Attach copy of certificate or Completion Date)

TOTAL # OF PARTICIPANTS (up to 20 athletes): \$200 (Ck # _____)

TOTAL # OF PARTICIPANTS (21 athletes or more): \$300 (Ck # _____)

Make **Checks Payable To:** **CATHOLIC YOUTH OFFICE (or CYO)**

1658 W. Grand Avenue

Chicago, IL 60622

ATTN: Kimberly Williams

VOLUNTEERS:

CHOICE OF EVENT:

1. _____

1st _____

2nd _____

2. _____

1st _____

2nd _____

CYO TRACK & FIELD MEET
JV BOYS (6th GRADE & UNDER)

SCHOOL: _____

COACH: _____

PRINT the FULL NAME of the participant entered in each event.

100 METER DASH (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 100 METER RELAY (limit - 2 teams)

1. _____
2. _____
3. _____
4. _____

200 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 200 METER RELAY (limit - 2 teams)

1. _____
2. _____
3. _____
4. _____

400 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 400 METER RELAY (limit - 2 teams)

1. _____
2. _____
3. _____
4. _____

800 METER RUN (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

HIGH JUMP (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

LONG JUMP (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SHOT PUT (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

CYO TRACK & FIELD MEET
JV GIRLS (6th GRADE & UNDER)

SCHOOL: _____

COACH: _____

PRINT the FULL NAME of the participant entered in each event.

100 METER DASH (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 100 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

200 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 200 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

400 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 400 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

800 METER RUN (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

HIGH JUMP (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

LONG JUMP (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SHOT PUT (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

CYO TRACK & FIELD MEET
VARSIY BOYS (7th & 8th GRADE)

SCHOOL: _____

COACH: _____

PRINT the FULL NAME of the participant entered in each event.

100 METER DASH (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 100 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

200 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 200 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

400 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 400 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

1600 METER RUN (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

HIGH JUMP (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

LONG JUMP (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SHOT PUT (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

CYO TRACK & FIELD MEET
VARSIY GIRLS (7th & 8th GRADE)

SCHOOL: _____

COACH: _____

PRINT the FULL NAME of the participant entered in each event.

100 METER DASH (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 100 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

200 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 200 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

400 METER RUN (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

4 x 400 METER RELAY (limit – 2 teams)

1. _____
2. _____
3. _____
4. _____

1600 METER RUN (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

HIGH JUMP (limit is 5)

1. _____
2. _____
3. _____
4. _____
5. _____

LONG JUMP (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

SHOT PUT (unlimited)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

*** MUST BE COMPLETED & TURNED IN AT THE CYO MEET ***

PARENTAL / LEGAL GUARDIAN AUTHORIZATION - Required for ALL Participants

I hereby give permission for my child _____ to participate in the **Catholic Youth Organization Grade School Track & Field Championship Meet on May 20, 2023 at Chicago Hope Academy** in Chicago. (I understand that this event includes running, jumping, & other skills.) There is an inherent risk in track & field. Injuries include but are not limited to sprained ankles, muscle pulls, injury to joints, brain, bones, ligaments & tendons, neck & back injuries and even death. In an effort to make the event run more safely, it is vital that all athletes follow the directions given.

I hereby release and indemnify the Catholic Youth Organization, its Track & Field Program, its staff, volunteers, Maryville Academy, Chicago Hope Academy, and the Catholic Bishop of Chicago, a corporation sole, from any and all liability arising from claims of any kind or nature whatsoever from my child's participation in this program.

Participant's School

PRINT Name of Parent/Legal Guardian

Date of Birth

Age

SIGNATURE of Parent/Legal Guardian

Circle GENDER IDENTITY: Female Male

Address (include Apt. #, if applicable)

Circle GRADE: 3 4 5 6 7 8

City, State, and ZIP CODE

Circle DIVISION JV (6U) V(7 & 8)

(_____) _____

CELL Phone - PARENT/ LEGAL GUARDIAN

EMAIL for PARENT / LEGAL GUARDIAN

MEDICAL PERMISSION AUTHORIZATION ** this section must be filled out completely

I grant permission for the administration of first aid to my child, _____
BY THE PEOPLE IN CHARGE OF THE CYO MEET and those transporting my child to and from the program as their judgment deems advisable. I grant the people in charge of the event the permission to make the necessary referrals to qualified physicians for treatment of illnesses or accidents of a more serious nature. I understand that I will be promptly notified in the event of any serious illness or accident and prior to any major surgery, except when a delay in such communication would endanger life. In case of a medical emergency, I understand that every effort will be made to contact the parent/legal guardian of the participant. In the event I cannot be reached, I hereby grant permission to the physician selected by the adult staff to hospitalize, secure proper treatment for, and to order injection, anesthesia or surgery, if deemed necessary, for my child. **If my child has symptoms / tests positive for COVID-19, I will follow CDC guidelines (based on vaccination status) and notify the Team Coach(es) immediately.**

Signature of Parent/Legal Guardian: _____ **Date:** _____

Family Physician: _____ **Phone** (_____) _____

INSURANCE INFORMATION ** this section must be filled out completely

Policy in the Name of: _____

Insurance Company: _____ **Policy Number:** _____