



LITTLE ROCK OPEN

Saturday, Oct. 17, 2020

War Memorial Park

5110 W. Markham St.

Little Rock, AR 72205

ENTRIES

Meet is open to all NCAA DI, DII, DIII, NAIA and NJCAA teams. Entries will close Wednesday, Oct. 16th. Entries will be done through Direct Athletics.

ENTRY FEE

Payment due at check-in. Make checks payable to UALR; \$150 per team. Men and Women are separate. \$20 for each unattached entry.

SPORTS MEDICINE

Sports medicine tent will be available at the finish line.

SCHEDULE

10:15 a.m.: Women's 5K

11 a.m.: Men's 8K

Location: War Memorial Park

If you have any questions, please contact JP Behnke at jpbehnke@ualr.edu.

ALL participating teams must fill out the Sun Belt COVID-19 Certification Form included in this information packet.



SUN BELT CONFERENCE

(Non-Sun Belt Conference Institutions)

INSTRUCTIONS

Regular COVID-19/Coronavirus testing is a critical element in the Sun Belt Conference safe return to activities protocol. The Conference requires all teams that compete against Sun Belt members to meet the weekly testing protocols established by the Sun Belt Conference. Athletic Directors of non-conference institutions should arrange for a medical professional **external** to the athletics department (a team’s physician is acceptable) to complete this certification with respect to:

- Coaches
- Players
- Team support (i.e., medical staff, team physicians, team travel party)

Once the certification is executed, the completed form must be sent electronically to the Athletic Director, Head Sports Medicine Director, and Head Coach of the institution’s opponent on the day prior to the event no later than 8 p.m. Local Time for the Host Institution. ***A representative from the Sun Belt school is responsible for sending copy to the Conference Office to keene@sunbeltsports.org.***

CERTIFICATION

By signing and dating this form, you certify that the coaches, players, and team support members from _____ who will be participating in a _____
Name of Institution *Sport*

athletic competition between _____ and _____
Name of Host Institution *Name of Visiting Institution*

has received at least one PCR or Atila LAMP COVID-19/Coronavirus test within 72 hours of the aforementioned contest and that the tests results were negative. The institution may choose to satisfy this testing requirement with two antigen tests (e.g., Quidel or Becton Dickinson’s), provided the first test occurred no more than 72 hours prior to the contest noted above and the second test is administered within 24 hours prior to the contest.

By signing below, you certify that you are a licensed medical professional and to the best of your knowledge all information contained in this form is truthful.

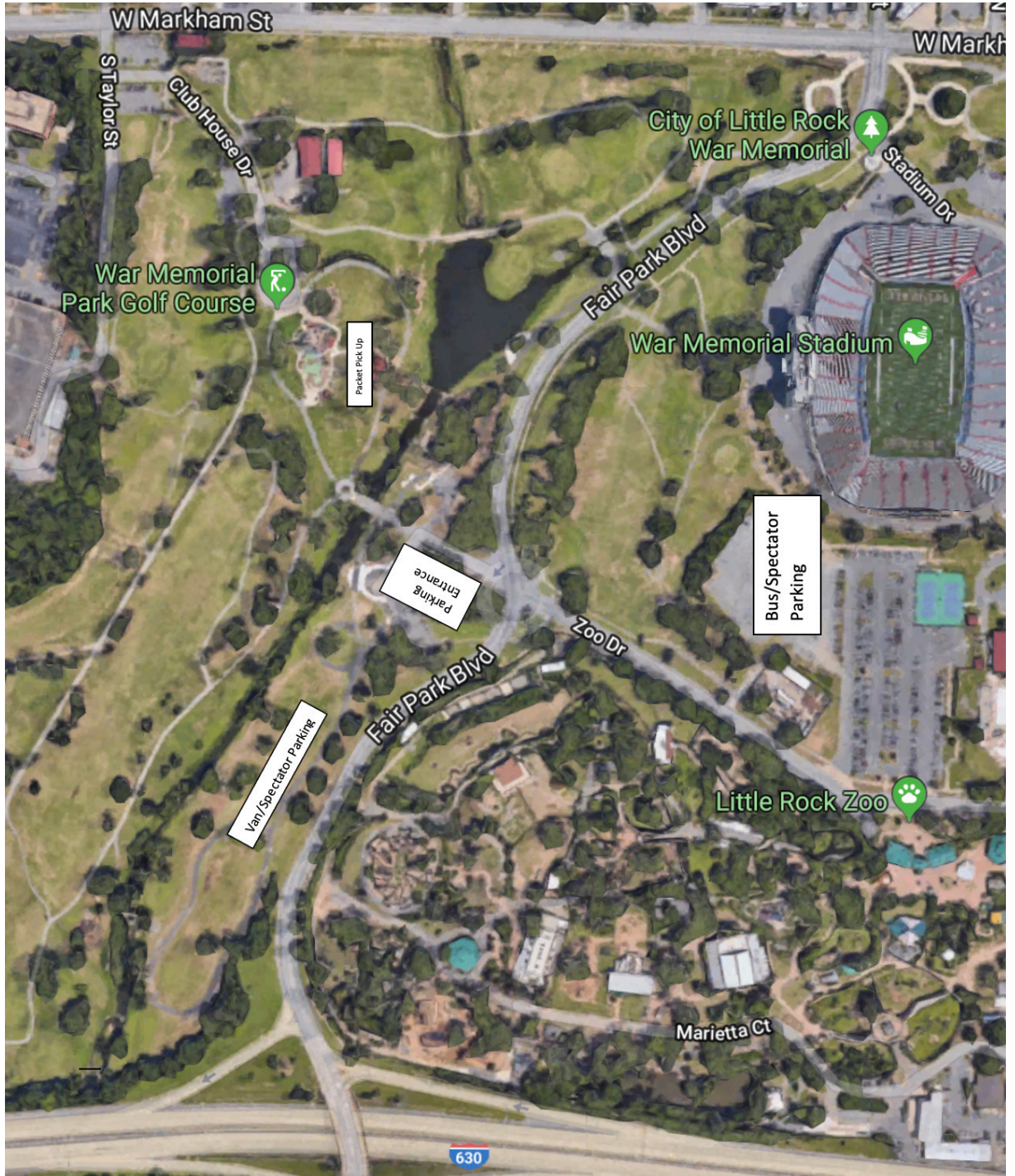
Name (please print)

Title (please print)

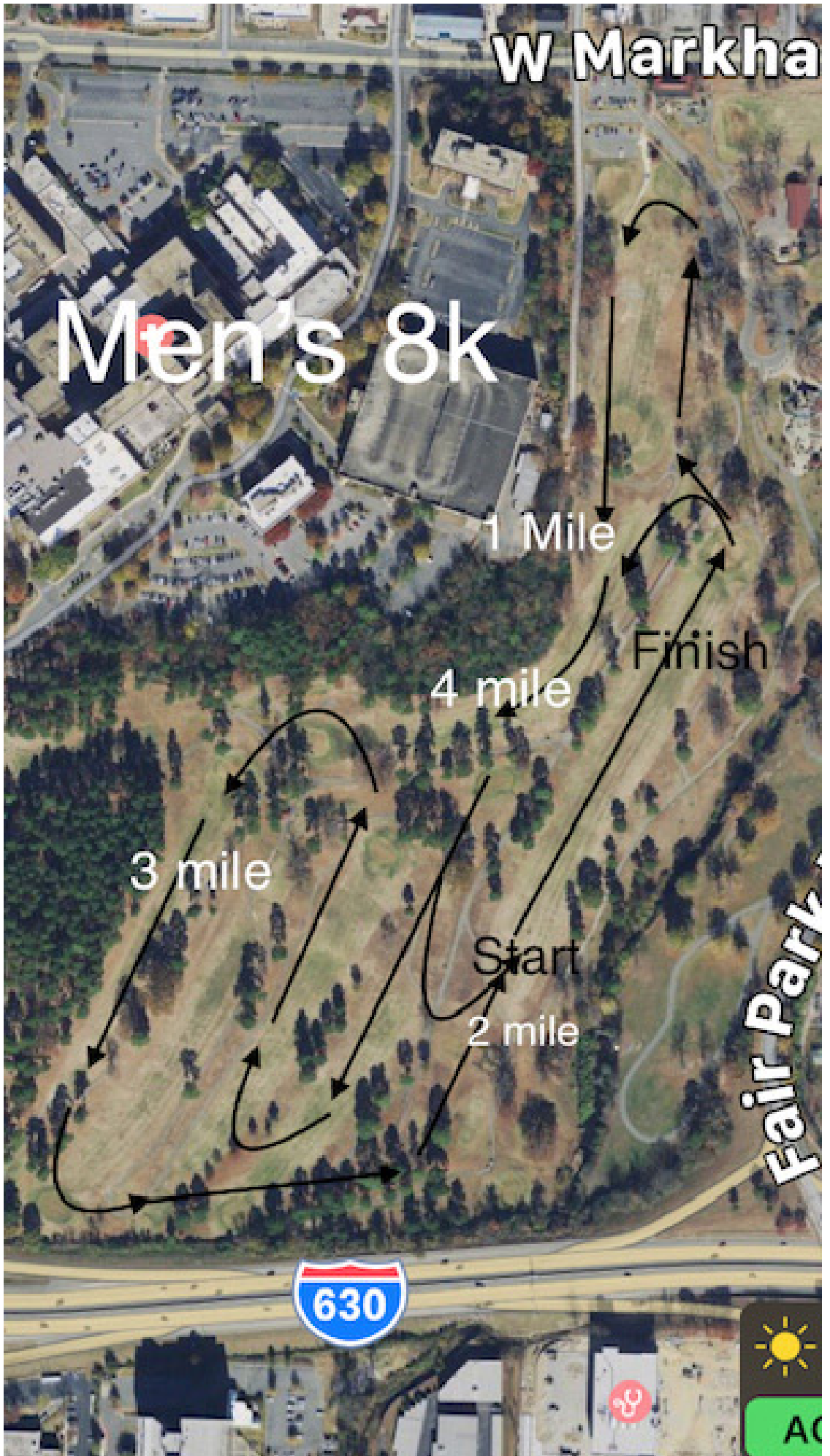
Signature-Medical Professional Visiting Team

Date

PARKING MAP



MEN'S 8K COURSE MAP



WOMEN'S 5K COURSE MAP

