CROSS COUNTRY
TRACK & FIELD

2026 WINTER
ALL-COMERS MEET

Kidd Field @ Larry K. Durham Track
500 W. University Ave
El Paso, TX, 79968

SATURDAY, DECEMBER 5, 2026

COST: $20.00 PER PERSON (NO EVENT LIMIT)

COMMUNITY EVENT OPEN TO THE PUBLIC TO PARTICIPATE

CROSS COUNTRY TRACK & FIELD

2026 WINTER ALL COMERS MEET
MEET INFORMATION

PRE-REGISTRATION:

- Registration will be on https://www.athletic.net/team/21463/track-and-field-indoor/2026
- If you do not have an account you will need to create one on the website. Instructions are attached below.
- Must be 6 years old and older to compete
- Registration will be open on October 1, 2026 and will close on December 2, 2026 at 12:00pm.
- You must enter a time/mark for each event you will participate in, if you do not have a mark then leave it blank.

PAYMENT METHOD:

- Entries fees will be paid on online by credit card on athletic.net or cash at the meet

RUNNING EVENTS:

- Men's races will compete first followed Women's Races
- Athletes must be checked-in 15 min prior to your event at the start line.
- Warm-ups will be located on Glory Field. See Map for location
- Sprint outs on the west side of the track near the Fun Zone are allowed (not during lap events or relays)

RELAYS:

- Unattached athletes can register for relays the day of the event at the registration table. Mixed genders are allowed.

FIELD EVENTS:

- Women & Men will be combined with the Women going first in order followed by Men.
- Field events athletes will report directly to their event area. Field participants must check-in with the head judge of their event NO LATER THAN 30 minutes prior to the start of their event. If they are not checked-in they will be scratched from the event.
- Competitors may be around their event area for warm-ups 1 hour prior to the competition
- Throws & Horizontal jumps will get 4 attempts only.

TIMING & RESULTS:

- 915 Timing; 915 Timing – Precision Timing – Where every second counts. Final Results will be available on Athletic.Net

PARKING:

- All parking will be located in GR2 (Glory Road 2) see map on page. Glory Road Garage will be available to park for $20. RA2 will be for officials and ADA parking only.

ENTRANCE

- Spectators and Participants must enter Kidd Field at the gate located on the North East end of the Track stadium. There will be an entry fee of $5 for non competitors. Under age 5 get in free.

UPDATED MEET INFO:

- Please visit website closer to meet time for updated schedule and information. https://utepminers.com/sports/track-and-field

YOUTH PROTECTION:

- All youth under the age of 18 MUST fill out the youth protection wavier located on our website and attached to the meet information.

Contact Information:
Please contact Abby Walls for all other questions: arwalls@utep.edu | Cell: 520-370-6801
****Best form of contact is via email***

CROSS COUNTRY
TRACK & FIELD

WINTER ALL-COMERS MEET
COMPETITION SCHEDULE

DECEMBER 5, 2026

TENTATIVE

FIELD EVENTS:

10:00am	Javelin	Unattached/Open	M/W Combined
Follows Unattached	Javelin	UTEP Orange & Blue	M/W Combined
10:00am- 11:00am	Long Jump	Unattached/Open	M/W Combined
11:00am	High Jump	Unattached/Open	M/W Combined
Follows UTEP Javelin	Discus	Unattached/Open	M/W Combined
Follows Unattached	Discus	UTEP Orange & Blue	M/W Combined
11:30am- 12:30pm	Triple Jump	Unattached/Open	M/W Combined
12:30pm	High Jump	UTEP Orange & Blue	M/W Combined
Follows Discus	Shot Put	Unattached/Open	M/W Combined
Follows Unattached	Shot Put	UTEP Orange & Blue	M/W Combined
Follows Shot Put	Weight Throw	Unattached/Open	M/W Combined
Follows Unattached	Weight Throw	UTEP Orange & Blue	M/W Combined
1:30pm	Long Jump	UTEP Orange & Blue	M/W Combined

RUNNING EVENTS:

12:00pm	4x100m Relay	UTEP Orange & Blue	** Running Events - Men first, followed by Women
12:05pm	4x100m Relay	Unattached/Open	
12:10pm	800 Meter	Unattached/Open	
12:20pm	60m High Hurdles 42”	UTEP Orange & Blue	Men
12:25pm	60m High Hurdles 39”	Unattached/Open	Men
12:30pm	60m High Hurdles 33”	UTEP Orange & Blue	Women
12:33pm	60m High Hurdles 33”	Unattached/Open	Women
12:40pm	60m Dash	UTEP Orange & Blue	
12:50pm	60m Dash	Unattached/Open	
1:00pm	1000m Run	Unattached/Open	(M/W Combined)
1:05pm	150m Dash	UTEP Orange & Blue	
1:15pm	150m Dash	Unattached/Open	
1:30pm	600m Run	UTEP Orange & Blue	
1:35pm	600m Run	Unattached/Open	
1:45pm	300m Dash	UTEP Orange/Blue	
1:50pm	300m Dash	Unattached/Open	
1:55pm	300m Hurdles 30”	UTEP Orange & Blue	Women
1:58pm	300m Hurdles 30”	Unattached/Open	Women
2:05pm	300m Hurdles 36”	UTEP Orange & Blue	Men
2:08pm	300m Hurdles 36”	Unattached/Open	Men
2:15pm	3000m Run	Unattached/Open	(M/W Combined)
2:30pm	4x800m Relay	Unattached/Open	(M/W Combined)
2:30pm	4x200m Relay	Unattached/Open	(M/W Combined)
2:45pm	4x300m Relay	UTEP Orange & Blue	



WINTER
ALL COMER'S MEET

FACILITY & PARKING MAP

GLORY FIELD
- Warm Up Area on Field

SUN BOWL STADIUM EAST CONCOURSE
- Team Restrooms
- Implement Weigh-In
- Staging/Clerking Area
- Access to Warm Up Lanes

GR-2 LOT:
- Official Parking
- Team Parking
- Bus Parking
- Spectator Parking

GLORY ROAD PARKING GARAGE:
- Paid Parking

RA2 LOT:
- Official / ADA Parking

The University of Texas at El Paso
Athletic Camp
Minor Participation Form

Participant's Name_____DOB_____

Address_____

Street_____ City_____State_____Zip Code_____

Phone_____ Activity/Description:_____

Dates: _____ Location_____

AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT

I. MEDICAL INFORMATION (pleases type or print legibly)

Name of Parent/guardian_____

Address_____
(Street or P.O. Box, city, state, zip code)

Telephone #: Office_____

Night_____

Participant's Allergies_____

_____

Health Insurance Company_____

Telephone #: _____

Policy #_____

Participant's Current Medications_____

_____

Participant's Special Health Needs_____

_____

II. EMERGENCY MEDICAL AUTHORIZATION

I, the undersigned parent or legal guardian of the above named minor, do hereby authorize The University of Texas at El Paso and its agents or representatives to consent, on my behalf, to any medical/hospital care or treatment (including locations outside the U.S.) to be rendered to him or her upon the advice of any licensed physician. I agree to be responsible for all necessary charges incurred by any hospitalization or treatment rendered pursuant to this authorization.

III. SPECIAL ACCOMMODATIONS/NEEDS

If you have or suspect, a disability and need an accommodation, please contact our staff at (915) 747-7601 or DaGarcia72@utep.edu to request any special accommodations/needs.

IV. PARTICIPATION GUIDELINES

Participants, or their representatives, who behave in a manner which is disruptive to the learning process, or which interferes with the well-being of other participants or staff, or which may cause damage to University or contracted facilities, may be subject to permanent removal. Please refer to competition/camp guidelines for refund policies.

1. Participants have a responsibility to the environmental settings where our events are being held including building grounds, furnishings and natural wildlife. If a Participant is responsible for any damage, the parent of that Participant will be held financially responsible for the specific repair costs of those damages.
2. Participants will not be allowed to leave designated buildings or areas and will participate in all group activities, unless given expressed permission by an adult sponsor or adult staff member to do otherwise.
3. Parents or Guardians are responsible for making sure Participants dress appropriately. It is not suitable for males or females to wear clothes that expose undergarments.
4. Radios, recorders, tape and CD players, TV's, electronics and video games, skateboards, roller skates and blades, etc. tend to be a distraction to the individual and must to be left at home. Cell phones are allowed, but need to be left in a pocket or purse and not used. The University of Texas at El Paso is not responsible for these items if they are brought to course/camp.
5. Participants need to show consideration and respect of others, including other participants and instructors. Offensive language will not be tolerated.
6. No illegal substances will be allowed. UTEP is a drug-free institution.
7. All individual classroom and/or facility policies must be followed.

In order for your child to participate, please fill out BOTH sides of this form completely.

MINOR RELEASE AND INDEMNIFICATION AGREEMENT

I am the Parent/Guardian of the above-named Participant who is under eighteen years of age and am fully competent to sign this Agreement. I give permission for him/her to participate in the above-referenced Activity or Trip. I acknowledge that the nature of the Activity or Trip may expose him/her to hazards or risks that may result in illness, personal injury or death and I understand and appreciate the nature of such hazards and risks.

In consideration of Participant being permitted to partake in the Activity or Trip, I hereby accept all risk to Participant's health and of his/her injury or death that may result from such participation and I hereby release The University of Texas at El Paso, its governing board, officers, employees and representatives from any liability to Participant, Participant's personal representatives, estate, heirs, next of kin, and assigns for any and all claims and causes of action for loss of or damage to Participant's property and for any and all illness or injury to Participant's person, including death, that may result from or occur during Participant's participation in the Activity or Trip, whether caused by negligence of the University, its governing board, officers, employees, or representatives, or otherwise. I further agree to indemnify and hold harmless the University and its governing board, officers, employees, and representatives from liability for the injury or death of any person(s) and damage to property that may result from Participant's negligent or intentional act or omission while participating in the described Activity or Trip. The indemnification related to the loss or damage of Participant's personal property further applies to the storage of Participant's personal property and equipment while participating in the abovementioned activity or trip**.**

I HAVE CAREFULLY READ THIS AGREEMENT AND UNDERSTAND IT TO BE A RELEASE OF ALL CLAIMS AND CAUSES OF ACTION FOR PARTICIPANT'S INJURY OR DEATH OR DAMAGE TO PARTICIPANT'S PROPERTY THAT OCCURS WHILE PARTICIPATING IN THE DESCRIBED ACTIVITY OR TRIP AND IT OBLIGATES ME TO INDEMNIFY THE PARTIES NAMED AND FOR ANY LIABILITY FOR INJURY OR DEATH OF ANY PERSON AND DAMAGE TO PROPERTY CAUSED BY PARTICIPANT'S NEGLIGENT OR INTENTIONAL ACT OR OMISSION.

MEDIA CONSENT AND RELEASE

I hereby authorize The University of Texas at El Paso, and those acting pursuant to its authority to:

a) Record Participant's likeness and voice on a video, audio, photographic, digital, and electronic or any other medium.
b) Use Participant's name in connection with these recordings.
c) Use, reproduce, exhibit or distribute in any medium (e.g. print publications, video tapes, CD-ROM, Internet/WWW), these recordings, in whole or in part, without any restrictions or limitations, for any purpose that the University, and those acting pursuant to its authority, deem appropriate, including educational, promotional or advertising efforts.

I release the University and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I and/or Participant may have in connection with such use. This release is executed gratuitously and/or for any self-satisfaction which I and/or Participant may derive from any publication or programs in which my likeness or voice will appear. I understand that all such recordings, in whatever medium, shall remain the property of the University.

☐ I do authorize The University of Texas at El Paso, and those acting pursuant to its authority in accordance with this this Media Consent and Release. _____ Parent/Guardian Initial

☐ I do not authorize The University of Texas at El Paso, those acting pursuant to its authority in accordance with this this Media Consent and Release. _____Parent/Guardian Initial

AUTHORIZATION FOR DROP OFF, PICKUP & TRANSPORTATION:

1. I hereby authorize the following names to either drop off or pick up Participant. Each person will be informed that it is his or her responsibility to show proof of identity to the designated course/activity instructor. *(Please remember to include your name as well, if applicable).*

Full Name_____ Relationship_____ Driver's License# _____
Full Name_____ Relationship_____ Driver's License# _____
Full Name_____ Relationship_____ Driver's License# _____

2. ☐ I do authorize The University of Texas at El Paso to release Participant to transport him/herself to and/or from designated course/activity (i.e. walking, biking, public transportation, own vehicle)._____Parent/Guardian Initial

I HAVE READ AND FULLY UNDERSTAND THE TERMS OF ALL RELEASES ON THIS FORM INCLUDING THE AUTHORIZATION FOR EMERGENCY MEDICAL TREATMENT, PARTICIPATION GUIDELINES, THE RELEASE AND INDEMNIFICATION AGREEMENT, THE MEDIA CONSENT AND RELEASE, AND AUTHORIZATION FOR DROP OFF, PICKUP & TRANSPORTATION.

_____	_____	_____
Parent/Guardian Name (PRINT)	Signature of Parent/Guardian	Date
_____	_____	_____
Witness (PRINT)	Signature of Witness	Date