Registration Form

First Name	
Last Name	
Age Grade	
Home Address	
City/State/Zip	
Athlete Cell	
Emergency Contact Number	
Email Address	
High School	
MEDICAL:	
Allergies	
Medical Conditions	
PARTICIPATING IN: (choose one only)	
□ Sprints □ Hurdles □ Vault □ Throws	
☐ Distance ☐ Horizontal Jumps ☐ High Jump	
Unisex T-Shirt Size: S M L XL XXL	. 🗆 XXX
Using Group Discount? ☐ YES ☐ NO	
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Please list athletes attending if you're using group .	aiscoun
1	
2	
3	
4	
HOLD HARMLESS/WAIVER/RELEASE OF LIABILITY	(on bac
Parent/Guardian Name (PRINT PLEASE)	Date
Parent/Guardian Signature (REQUIRED)	Date
Checks payable to: University of Dubuque	
Mail form AND weiver to	

University of Dubuque

Track and Field Academy

2000 University Avenue

Dubuque, IA 52001

UNIVERSITY of DUBUQUE 2000 University Avenue Dubuque, Iowa 52001



UNIVERSITY OF DUBUQUE 2014

Track & Field Academy

UNIVERSITY of DUBUQUE

Track & Field Academy Schedule

8:30am	Day 1 check-in
9:00am	Classroom Session/Video Analysis Mercer Birmingham Hall
10:00am	Event Split Practice - Progression 1 Sprints/Jumps/Hurdles/Vault/ Throws/Distance Indoor Track
11:00am	Snack
11:15am	Event Split Practice - Progression 2 Sprints/Jumps/Hurdles/Vault/ Throws/Distance Indoor Track
12:00pm	Strength/Core Circuit
	Weight Room
12:45pm	Cool down/Recovery

Track & Field Academy

Event Education and Video Analysis 3-Week Camp

Sundays 9am-1pm | Day 1 check-in 8:30am (check-in in Mercer Birmingham)

January 12, 19, 26, 2014

Camp Pricing: \$150 Per Person

Group Discount: \$25 OFF when you sign up with 2 or more teammates. Please mail forms together.

WHAT TO BRING:

- Athletic Apparel
- Running Shoes
- Event Shoes/Spikes
- Implements (indoor shots/discs)
- Pole vault poles
- Water bottle
- Writing utensil (pen/pencil)

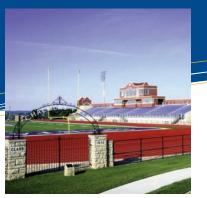
PROVIDED:

- Camp T-Shirt
- Training Manual

SEE INSIDE FOR WAIVER AND REGISTRATION INFORMATION.









Join the University of Dubuque coaching staff, along with other area college and high school coaches for event specific training and development. The Academy will be held at our state-of-the-art indoor track located inside the Chlapaty Recreation and Wellness Center. Our academy is designed to provide you with a great experience, and prepare you for a successful track and field season.

Academy Staff:

Sprints/Relays - Chad Gunnelson University of Dubuque - Head Track & Field Coach CGunnelson@dbq.edu

Throws - Jake Malm University of Dubuque - Assistant Coach/Throws MMalm@dbq.edu

Distance - Geoff Gundlach University of Dubuque - Assistant Coach/Distance GGundlach@dbg.edu

Hurdles/Jumps - Joel Janecek University of Dubuque - Assistant Coach/Hurdles/Jumps JJanecek@dbq.edu

Vertical Jumps – Pat Lockington University of Dubuque - Assistant Coach/Vertical Jumps PLockington@dbg.edu

How To Register:

Please fill out the registration form in its entirety, and return with a signed Academy waiver and registration fee via mail to the address shown. It is very important to write legibly, taking care to answer all questions listed on the registration form.

Please note, we will accept day of registration but prefer that you register early or contact us prior to attending.

Early registration deadline: Monday, January 6, 2014.

EARLY REGISTRATION DEADLINE: Monday, January 6, 2014

UNIVERSITY of DUBUQUE

Track & Field Academy Hold Harmless/Waiver/Release of Liability

Each participant's parent/guardian must complete this form prior to their son/daughter's participation in the UD (University of Dubuque) Track & Field Academy. Please read this form carefully and be aware that you will be waiving and releasing all claims for any injury/illness sustained during this activity by your son/daughter.

- As the parent/guardian of the participant, I certify that he/she is physically/mentally able to participate in this activity. Furthermore, permission is hereby granted to UD to provide necessary first aid treatment for the camper as well as permission to transport to a medical facility in the event of injury.
- UD does not carry medical insurance for injuries/illness sustained arising out of this activity. It must be noted that the absence of health insurance coverage does not make UD responsible for payment of medical expenses.
- In consideration for the participant's involvement in the UD above named activity, I agree to assume all risk and fully release from all liability UD, members of the University community, its directors, officers, trustees, agents, servants and employees for any injuries including death, damages or loss of severity which my child may sustain as a result of participating in this activity.
- I agree to waive and relinquish all claims I may have against the UD community, its directors, officers, trustees, agents, servants, and employees, as a result of participating in this activity.
- I further agree to indemnity and hold harmless UD, members of the UD community, its directors, officers, trustees, agents, servants, and employees from any and all claims from injuries/illness including death, damages and losses sustained by my child stemming from or in any way associated with my participation in this activity. This will include holding UD harmless from negligence on the part of the university.

I certify by signing the Hold Harmless/Waiver/Release of Liability Agreement on the registration form, that I agree to ALL terms listed above.