



Wartburg



Track and Field

Hosting: Three technical track and field day clinics

Grades: 9-12 (high school)

Dates & Times:

Sunday, December 4th, 2011 –

Sprint and Hurdle Technical Clinic

(1st 60 to sign up)

Registration: 8:00am - 8:45am

Clinic Time: 9:00am - 1:00pm

Registration Cutoff:

Thursday, December 1st, 2011

Sunday, February 26th, 2012 –

Sprint and Hurdle Technical Clinic

(1st 60 to sign up)

Registration: 12:00pm – 12:45pm

Clinic Time: 1:00pm – 5:00pm

Registration Cutoff:

Tuesday, February 21st, 2012

Sunday, March 4th, 2012 –

Shot Put, Discus, Long Jump, & High Jump, Hurdle Technical Clinic

(1st 60 entries to sign up)

Registration: 12:00pm – 12:45pm

Clinic Time: 1:00pm – 5:00pm

Registration Cutoff:

Tuesday, February 28th, 2012

Locations: Wartburg College, Waverly, IA – Indoor track, located in The W.

Cost: \$65 for one day technical track and field clinic; includes clinic t-shirt and handout

Registration Form: This form must be completed, signed by parent and mailed by cutoff dates above.

Please Select the Clinic(s) wanting to attend:

_____ Sunday, December 4th, 2011 Sprint and Hurdle Technical Clinic

_____ Sunday, February 26th, 2012 Sprint and Hurdle Technical Clinic

_____ Sunday, March 4th, 2012 Shot Put, Discus, Long Jump, & High Jump Technical Clinic

Please Print:

Name _____

Male/Female _____

Phone _____

Address _____

City _____ State _____ Zip _____

Grade _____

High School _____

Event/Time/Distance _____

T-Shirt size: S M L XL

**Make checks payable to Wartburg College.

**Mail completed form, signed by guardian, and payment to:

Marcus Newsom, Head Track and Field

Wartburg College, 100 Wartburg Blvd., PO Box 1003, Waverly, IA 50677-0903

Parent's Release and Indemnity Agreement

To: WARTBURG TRACK AND FIELD CLINIC
I hereby request that you accept the application for enrollment of _____ in the 2011-12 Wartburg Track and Field Clinic during the dates set forth in this application and in consideration of your acceptance of the application, hereby release the Board of Regents of Wartburg College and all its employees from all claims on account of any injuries which may be sustained by my child while attending the 2011-12 Wartburg Clinic; and I agree to indemnify the Board of Regents of Wartburg College and its employees for any claim in which may here after be presented by my child as a result of any such injuries. I also authorize the training staff and medical personnel to treat my child in the event of illness or injury.

*** Parents signature is required for participation in clinic, no signature, no participation

Parents Signature _____

Date _____

Phone _____ / _____