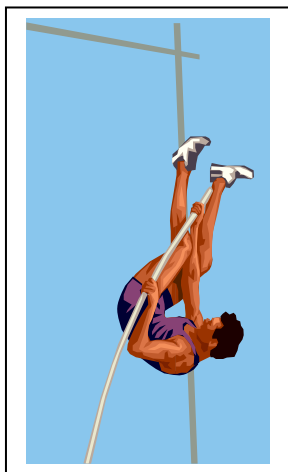


Landon Athletics Pole Vault Camp

Registration Information



<i>date of camp</i>	
<i>name/age</i>	
<i>address</i>	
<i>city, state, zip code</i>	
<i>home phone number</i>	
<i>e-mail address</i>	
<i>school</i>	
<i>personal best height</i>	
<i>emergency contact</i>	<i>phone:</i>
<i>family doctor</i>	<i>phone:</i>
<i>insurance company</i>	<i>policy #</i>
<i>any medical conditions</i>	

Awareness of Risk

By participating in athletic activity, there are possibilities of serious injuries and death. The staff working with the Landon Athletics Pole Vault Camp are well qualified, professional people. Safety will be the number one concern. It will continually be emphasized on and off the activity areas. The information contained below is to inform individuals in this program and their parents of proper techniques for maximum safety.

rules and procedures

1. Always follow prescribed warm up to prevent injuries.
2. Always follow technique outlined by coaches. Do not attempt to improvise.
3. If in doubt, to any rules or to what you are doing, ask your coach before proceeding.
4. Never use a pole rated below your body weight.
5. Never release hand grip from the pole until safely over landing area.
6. Never allow your hand grip to exceed height advised by the coaches.
7. Always check poles for any defects.
8. Always follow all manufacturers' guidelines on pole usage.

This report does not cover all potential injury possibilities in the camp, but it is an attempt to make the athletes and their parents aware that fundamentals, coaching, and proper use of equipment are important to their safety and enjoyment at the Landon Athletics Pole Vault Camp.

By signing the line below, I hereby state that I grant my child permission to participate in Landon Athletics Camp and that I've had or my child has had and passed a physical examination in the past year and that I am or he/she is in good health in which to compete in the rigors of the events in the camp. I also understand the necessity of using the proper techniques while participating in the Landon Athletics Pole Vault Camp. I agree to indemnify, hold harmless and defend Jerry Sessions, Landon Athletics jumpers, Maple Valley High School, and/or their agents or employees from any and all liability for injury to my child, as well as any injury or damage caused by my child. Should medical treatment for my child be necessary, I hereby authorize any physician or trainer selected by camp personnel to order and conduct medical or surgical procedures necessary. In addition, I hereby grant permission for Landon Athletics to use any photography or videotape of related camp activities for advertising or educational video materials.

mail form with payment to:

Landon Athletics, LLC
PO Box 538
Nashville MI 49073

make checks payable to:

Landon Athletics, LLC

_____	_____
signature of athlete	date
_____	_____
signature of parent or guardian (if minor)	date