

# **Cumberland Valley Track and Field Camp – 2017**

## **Hurdles, Jumps, and Throws**

**Who:** Athletes entering grades 7, 8, or 9  
**When:** Monday, June 19 – Friday, June 23 (9 AM – 12 noon)  
**Where:** Cumberland Valley High School Track  
**Cost:** \$90 – Postmarked by June 12, 2017

Interested in learning how to hurdle, throw the discus, or long jump? CV Track and Field Camp is your opportunity to learn and try new and different skill events or hone skills you may have developed in middle school track and field. The focus this week will be on hurdle, jump, and throw techniques. Jumping events will include long jump, high jump, and triple jump. Throws will include shot put, discus, and javelin. You do not need any prior experience to attend track and field camp!

Questions? Contact Coach Sharon Smith at [ssmith@cvschools.org](mailto:ssmith@cvschools.org).

Please fill out the attached form and mail it, along with payment, to:

CV Track and Field Booster Club  
c/o Sharon Smith  
6313 Auburn Drive  
Mechanicsburg, PA 17050

Checks should be made payable to: CV Track and Field Booster Club

*See next page for application.*

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ALL APPLICATIONS AND FEES POSTMARKED BY: JUNE 12, 2017

Please make checks payable to: **CV Track and Field Booster Club**

Name: \_\_\_\_\_ Entering grade: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Interested in: Hurdles \_\_\_\_\_ Jumps \_\_\_\_\_ Throws \_\_\_\_\_ Any/All \_\_\_\_\_

### Parent Consent and Emergency Contact Information

I give consent for my son/daughter \_\_\_\_\_, to participate in all activities at the Cumberland Valley Track and Field Camp. I agree that the Cumberland Valley School District, members of the School Board, members of the Cumberland Valley Booster Club, and the coaching staff will in no way be responsible for any injuries suffered by my son/daughter while engaged in the program activities. I hereby release the aforesaid from any and all liability for such injuries.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Printed name of parent/guardian \_\_\_\_\_

Parent/guardian phone number(s) \_\_\_\_\_

(Include #s for 9AM – 12 noon) \_\_\_\_\_

Parent email (receipt of application will be confirmed) \_\_\_\_\_

In case of an emergency, and in the event that we cannot reach a parent/guardian via the numbers listed above, please list the name, relationship, and phone number of a person to contact.

Emergency contact's name \_\_\_\_\_

Relationship to athlete \_\_\_\_\_

Emergency contact's phone number(s) \_\_\_\_\_

**If there are any allergies or medical conditions that we need to be aware of, please attach a separate note giving specific instructions for treatment.**