



EASTERNXC

LOUISVILLE EASTERN HIGH SCHOOL CROSS COUNTRY

YOUTH RUNNING CAMP

Camp: Wednesday July 10th – Friday July 12th / 8:00 AM – 12:00 PM each day

Competition: Saturday Morning, 8-11am, July 13th, Meet at 8am, Competition to begin at 9:30am

****Note that our camp schedule has been adjusted because we cannot begin camp before July 10th due to the KHSAA Dead Period.****

Where: Eastern High School Track and Football Stadium

Students should be dropped off in the upper lot at the main Stadium Entrance

Who: For Students entering: 2nd grade – 8th grade

If you have questions please email michael.horan@jefferson.kyschools.us or call 502-807-1165.

What to Bring to Camp each day

Gym bag	Water bottle/Gatorade	Beach Towel/Yoga Mat to stretch on
Extra pair of socks	Snack	Great attitude and willingness to learn

Eastern High School Youth Running Camp Big Ideas

Running for Fitness and Competition	Technique and running form
Fun and Games	Nutrition

Camp Fees

\$55.00 if received by July 1st \$65.00 after July 1st

\$75.00 if you register at the camp on July 11th

Sibling Discount: Families with multiple campers take \$10 off each camp fee.

Each camper will receive a camp t-shirt

Make checks payable to: Eastern XC

Mail all Forms to the address below:

Mike Horan
12403 Barbizon Court
Goshen, KY 40026

This camp will be great training for any kids who are playing a sport. Whether the athletes are training for cross country, track, soccer, basketball, or any other sport, being a **great athlete - being in great shape** - is the key. Any talent level is welcome and will be encouraged and challenged. Brand new runners are also welcome.

Experienced runners are encouraged to do some running before camp so that at camp we can take it to the next level!

Coaches' Qualifications - Mike Horan

16 years Coaching Experience Track & Cross Country
University of Louisville Track and XC Team Captain
2006 Kentucky T&F Coach of the Year
2008 Area 3 Cross Country Coach of the Year
USATF Level 1 Certified Coach

Speaker Accomplishments

Our past speakers have included All American's, Olympians, NCAA Champions, Olympic Coaches, College Athletes, College Coaches, Healthcare Practitioners, and other experts.

We are excited to put together another great panel of speakers for the 2019 Eastern Youth Running Camp!

Camper Accomplishments

- Multiple campers have gone on to earn Middle School state championships after attending camp
- Many top 5 elementary and middle school teams have had groups of athletes attend camp
- Many campers have gone on to earn HS accolades including all-state honors, individual state championships in track/XC, state records, and All-American honors
- Former campers have gone on to enjoy running after high school including competing collegiately and continuing to enjoy running for fitness and fun

Eastern High School Cross Country Camp Form

LAST NAME _____ FIRST NAME _____

Grade you will be entering: _____ School: _____

ADDRESS, STREET _____

CITY _____ STATE _____ ZIPCODE _____ PHONE NO. (____) _____

Parent/Student Email address(es) _____ , _____

T-SHIRT SIZE: (CIRCLE ONE)

Youth small (8-10), Youth medium (10-12), Youth large (14-16), Adult small, Adult medium, Adult large, Adult XL.

Running Experience: (Tell us a little about your experience, check all that apply)

_____ I am a Brand New Runner

_____ I am running as conditioning for another sport, What sports? _____

_____ I run Track or Cross Country Runner

Years running _____

Best Mile Time _____

Longest Run this year _____

For experienced middle school runners there may be some opportunities

to run off campus with our camp counselors if given parent permission

Particularly for athletes who regularly run 4+ miles.

Yes _____

No _____

Parent Initial _____

Waiver of Liability and Statement of Fitness:

In consideration of acceptance of this entry and permission to participate in the Eastern High School Cross Country Camp I _____ (students name) hereby waive and give up myself, my heirs, my family members, and all claims against Eastern High School Cross Country Camp staff members, counselors, sponsors, and against any person associated with the Eastern High School Cross Country Camp in the case of injury which may directly or indirectly result from my participation at the Eastern High School Cross Country Camp. I also give my permission to the Eastern High School Cross Country Camp Staff to use any photography, video, or other recordings of me that are made during the course of the camp for news media purposes.

Rules for Camp

- Students are to be respectful to camp staff.
- Students are to listen and learn during teaching sessions.
- Students are to show respect to all other campers at the camp.
- Students are to keep their trash and personal items picked up during and after training sessions.

Any student that breaks these rules will be sent home immediately without a refund. The Eastern Cross Country Program is a program that demands discipline and excellence from its runners. If you agree to the above rules, sign below.

Photo/Video Release/Consent

Campers may be photographed or videotaped as a part of the camp. These images and videos may be used on social media, print, or online in promotion of and celebration of the camp. Your signature below and attendance at camp indicated permission and release.

Medical Consent Form

Permission is hereby granted to the attending physician to proceed with any medical or minor surgical treatment, x-ray examinations and immunizations for the above named student. In the event of serious illness, the need for major surgery, or significant accidental injury, I understand that an attempt will be made by the attending physician to contact me in the most expeditious way possible. If said physician is not able to communicate with me, the treatment necessary for the best interest of the above named student may be given.

In the event that an emergency arises during a practice session, an effort will be made to contact the parents or guardians as soon as possible. Permission is also granted to the athletic coach to provide the needed emergency treatment to the athlete prior to his or her admission to the medical facilities.

Student Signature:

Signature of Parent or Guardian:

Date:

Important phone numbers for emergency contacts: (mandatory)

Work:

Cell:

Family Physician

Home:

Other:

Insurance #