

**2011 NLAA / Pearlgate Athlete Development Camp
 Pearlgate Track and Field Complex, Mount Pearl
 July 4 – July 7, 2011**

Lunch - athletes are responsible for their own lunch as it is not included

The 2011 NLAA Pearlgate Athlete Developmental Camp will focus on the fundamentals of sprints, jumps and distance events, along with educational and skill development. The camp is open to athletes born in 1997 through 1994 (age 14-17). Each participant will receive instruction from coaches specializing in their event group over the four day period. There will also be a night event Tuesday at 7pm and presentations from various speakers that work in sports related fields. Cost of camp registration includes a camp T-shirt and camp photo. All athletes must be NLAA 2011 track & field registered members.

REGISTRATION FORM

(fillable form)

TRAINING SESSIONS

2 sessions on Monday, July 4, 9:30am - 12:00 noon and 1:30pm - 4:00 pm
 2 sessions on Tuesday, July 5, 9:30am - 12:00 noon and 1:30pm - 4:00 pm
 2 sessions on Wednesday, July 6, 9:30am - 12:00 noon and 1:30pm - 4:00 pm
 1 session on Thursday, July 7, 9:30am - 12:00 noon

COST & DEADLINES

\$100 by Monday, June 27, 2011
\$120 after Monday through July 4, 2011
Cheques payable to NLAA

ATHLETE INFORMATION

Last Name:		First Name:		Birth date:		Age:	Sex:
				Month: _____ Day: _____ Year: _____			<input type="checkbox"/> M <input type="checkbox"/> F
Street address:			MCP no.:		Home phone no.:		
P.O. box:		City:		Province:		Postal Code:	
E-mail:		T-shirt Size:			NLAA 2011 Membership #:		
		<input type="checkbox"/> Small / <input type="checkbox"/> Medium / <input type="checkbox"/> Large / <input type="checkbox"/> XLarge					
Event group (please check one box):		<input type="checkbox"/> Sprints / Relays/ Hurdles		<input type="checkbox"/> Middle Distance 800m – 1500m-3000m		<input type="checkbox"/> Long Jump	

Allergies / Injuries that camp staff must be aware:

IN CASE OF EMERGENCY

Name:	Relationship:	Home phone no.:	Work phone no.:
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PHOTO RELEASE

I hereby grant the NLAA permission to use my image in good taste in promotional materials, posters, Web sites and other merchandise. I release NLAA from all liability of any nature in the use of any electronic or film image and or audio for advertising purposes.

PARTICIPANT CONSENT FOR COLLECTION, USE AND DISCLOSURE OF PERSONAL INFORMATION

The NLAA understands the importance of protecting your personal information and compliance with government regulations. The NLAA collects "public" and "personal" information such as contact information, gender and date of birth to enable us to contact you and maintain communication with you; to provide accurate results and statistics. I agree that the NLAA can collect, use and disclose personal information about myself as set out above.

WAIVER

I understand that participation in sport involves risk of injury, and that I OR my son/daughter may be injured in the course of the participation in this event. I acknowledge that I am aware of the particular risks that are involved in the events that I OR my son/daughter will be participating in. I acknowledge that I have been given notice of this waiver. In consideration of the acceptance of my camp application for an Newfoundland and Labrador Athletics Association (NLAA) sanctioned event, I, for myself, my heirs, executors, administrators, successors and assigns HEREBY RELEASE, WAIVE AND FOREVER DISCHARGE the NLAA and its respective agents, officials, employees, contractors, representatives, successors and assigns of and from all claims, demands, damages, costs, expenses, actions and causes of action, whether in law or equity, in respect to death, injury, loss or damage to my person or property HOWSOEVER CAUSED, arising or to arise by reason of my NLAA One Day Permit or my participation in any NLAA sponsored and/or sanctioned event in the 2011 calendar year, whether prior to, during or subsequent to any such event AND NOTWITHSTANDING that same may have been contributed to or occasioned by NEGLIGENCE of any of the aforesaid. IF THIS WAIVER IS ALTERED THE REGISTRATION WILL BE REJECTED.

 Patient/Guardian signature

 Date