

Cozad Cross Country Camp

College coaches Ryan Mahoney (Hastings College), Scott Tanis (Augustana), Brad Jenny (Doane), and Brady Bonsall (University of Nebraska Kearney) will be working with high school cross country students on July 10, 2018 in Cozad, NE. This is a great opportunity for both runners and coaches to learn from college coaches.

Schedule

9:30-10:00- Check-in

10:00-11:00-Session 1 Stretching and warm ups with college coaches -- Morning Run

11:00-11:15 Water break/Questions and answer sessions with the coaches

11:15-12:00 Core workouts and benefits explained by college coaches -- Core Workout

12:00-12:45-Lunch

1:00-2:00 Session 3 with explanations from college coaches about the importance of nutrition and different types of workouts they recommend for runners

2:00-2:15 Water break/Questions and answer sessions with the coaches.

2:15-2:30 Dynamic Warm up / Stretching

2:15-2:45 Fun Run Competition (ends with slip and slide)

When? July 10, 2018, 10 a.m. - 3 p.m.

Cost: \$25 per student (if received by May 20) \$30 if received after. Coaches are free.

Where? Cozad High School, meet in the east parking lot.

Lunch: Provided (Subway sandwiches, chips, cookies, water)

Other notes: bring extra clothes, as your clothes will get wet during the fun run.

Send the registration form, permission slips, and a check to:

Nick Auwerda

Cozad Community Schools

1910 Meridian Ave

Cozad, NE 69130

Electronic submissions can be e-mailed to: nick.auwerda@cozadschools.net

Registration Form

School: _____

Coaches Name: _____

Student Name:

Student Grade:

Total number: _____ x \$25 = _____

Waiver and Release Form for Summer Camp

Liability Release and Parental Consent Form

In consideration of the acceptance of my application for the above program, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in said event. This release is intended to discharge in advance Cozad Community Schools Athletics, its officials, officers, employees, volunteers and agents from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assignees.

Parental Consent (Complete if applicant is under 18) I give consent for my child _____ to participate in the above activities, and I execute the above liability release on their behalf.

Consent for Treatment

I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity. It is understood that Cozad Community Schools Athletics will provide no medical insurance for such treatment, and that the cost thereof will be at my expense.

I have read and understood the foregoing registration liability release and parental consent form, and agree to all of its terms and conditions.

Parent/Guardian Signature	Print Name	Date
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Athlete Signature	Print Name	Date
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