**AIM HIGH POLE VAULT CLUB LLC**

2014 POLE VAULT CAMP

## July 10-12, 2014

**Aim High Pole Vault Club LLC** will be holding a pole vault day camp at Lee-Davis HS July 10th through the 12th. The cost of the camp will be $150 for athletes and $50 for coaches (coaches bringing athletes attend FREE). All skill levels are welcome.

All campers must be members of the United States Track and Field Association. (You can join at USATF.org) Aim High Pole Vault Club is USATF club # 5009.

Check-in will be from 12:00 pm to 1:00 pm on the 10th of July. The camp will begin promptly at 1:00 pm and will end at 6pm on the 10th and 11th and will run from 9:00 am to 2:00 pm on the 12th. There will be an optional “Backyard BBQ/Fun jump at Coach Bishop’s famous “Backyard” after the camp on Saturday.

Please note: This is a commuter Camp, attendees and coaches must provide their own transportation and accommodations.

Camp Coaches:

* Kyle Bishop, Teacher, Aim High Vault Club founder & Highland Springs HS Track Coach
  + - Eric Sandridge, Aim High Vault Club Coach, Lee-Davis HS coach and former Atlee HS/ College of William & Mary Vaulter
    - Bob Disse, Richmond T&F Club/ Maggie L. Walker Governor’s School vault coach

Featured Instruction by: David Butler – Vault coach at Rice University and one of the most knowledgeable pole vault coaches in the world!

**Where:** Lee-Davis HS - 7052 Mechanicsville Turnpike, Mechanicsville, VA 23111

**When:** July 10th – 12pm-6pm, July 11th - 1pm-6pm, July 12th - 9am-2pm

**Fees:** $150.00 campers

Free for coaches bringing Athletes

$50.00 coaches (not bringing athletes)

**Questions:** Coach Bishop 804-389-1165 [KBishop@aimhighpv.com](javascript:;)

Coach Sandridge 804-317-4438 [Eric.Sandridge@aimhighpv.com](mailto:Eric.Sandridge@aimhighpv.com)

Coach Disse 804-360-4773 [coachdisse@comcast.net](mailto:coachdisse@comcast.net)

Register online or mail signup form with a $50.00 deposit (the $100 balance is due the first day of the camp) to: Aim High Pole Vault Club, 8920 Hollycroft Ct., Mechanicsville, VA 23116

Please make checks payable to **Aim High Pole Vault Club LLC**

Registration Deadline: July 1st. If you miss the deadlines give Coach Sandridge or Coach Bishop a call for available openings. The camp is limited to the first 50 athletes with paid deposit of $50.

Note: NSF checks that were returned for collection are automatically forwarded directly to the Re$ubmitIt® check processing center by our bank. There, the check is converted into an electronic item and presented to the check writer’s account up to two additional times.

**Aim High Pole Vault Club LLC Vault Camp!**

**Registration & Risk Acknowledgement Form**

Athletes Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parents Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age: \_\_\_\_\_\_\_

Gender: \_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Vaulting Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

USATF Membership #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

As the Parent/Guardian of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ acknowledge and know that there is risk involved in the pole vault and that it is a potentially hazardous activity. I understand that the Aim High Pole Vault Club LLC will take precautions to minimize that potential. I do hereby waive, release and discharge all claims of whatsoever kind which I may have, or which may hereafter arise against Aim High Pole Vault Club, its proprietors, Lee-Davis High School, the Hanover Co. School System, its agents or employees.

Parent/Guardian Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Treatment Form**

In order for your child to receive prompt medical treatment in the event of an accident during the pole vault camp, we at Aim High Pole Vault Club LLC require that we have on hand a signed statement allowing your son or daughter to be treated in emergency situations. In all situations that occur you will be contacted and informed of any treatment needed.

In the event my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ is injured and in need of emergency medical treatment, I hereby give permission to the coaches of Aim High Pole Vault Club LLC to arrange for such treatment.

Parent Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Work Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance Company \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Policy Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency contact if you cannot be reached \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please Sign and Return by Mail or at Camp Registration. All athletes must have a form on file to participate in the camp.**