

TRINITY HIGH SCHOOL

Track & Field day-camp 2022

Calling all incoming 6th through 12th graders interested in Track & Field!!
Join us for a 4-day camp at Trinity High School to have fun learning more about this great sport, while you gain strength and fitness participating!

We will have different skill levels for the following events:

Sprinting, Distance/Mid-Distance Racing, Hurdles, Shot Put, Discus, Pole Vault (8th-12th grade only for pole vault), High Jump, Long Jump, Triple Jump

Dates & Time:	Monday, June 20th through Thursday, June 23rd 9:00 am -1:00 pm (lunch provided)
Place:	Trinity High School Track
Cost:	\$60.00 (Scholarships available) Cost includes a tee shirt and daily instruction & lunch
Deadline:	June 15th, 2022

Please make checks payable to: THS Track & Field
and mail to: THS Track & Field Camp, Joanne Harper, PO Box 508, Weaverville CA 96093-0508

Daily Themes (prizes given!) –

Monday – Wear your Crazy Socks 

Tuesday – Dress as your Favorite Athlete 

Wednesday – Scavenger Hunt 

Thursday – Camp Olympics 

Come dressed and ready to run and jump and play! Bring a water bottle & wear good athletic shoes. Any questions please call or text Joanne Harper (530) 739-3645

Parents/Guardians: Please fill out (*please print clearly*) and return with your \$60.00 (made out to THS Track & Field) by June 15, 2022. *Parent or guardian must sign each application for participation.*

Student Name:	
Address:	
Parent Cell No.:	
Student Cell No.:	
Age & Grade (2022-2023)	
Shirt Size (adult sizing)	XS S M L XL XXL (please circle)
Any medical conditions:	

Signed: _____ (Parent or Legal Guardian)

For insurance purposes please read and sign the back of this form.

Trinity Alps Unified School District

P.O. Box 1227 321 Victory Lane, Weaverville, CA 96093 530.623.6104 Fax 530.623.3418
<http://www.tausd.org/>

VOLUNTARY ACTIVITIES PARTICIPATION FORM ACKNOWLEDGEMENT AND ASSUMPTION OF POTENTIAL RISK

I authorize my child to participate in the Trinity Alps Unified School District Track & Field camp being held Trinity High School during June 20th – June 23rd, 2022.

I understand and acknowledge that these activities, by their very nature, pose the potential risk of serious injury/illness to individuals who participate in such activities.

I understand and acknowledge that participation in these activities is completely voluntary.

I understand and acknowledge that to participate in these activities, my son/daughter and I agree to assume liability and responsibility for any and all potential risks that may be associated with participation in such activities.

I understand, acknowledge, and agree that the Trinity Alps Unified School District, its elected or appointed officials, employees, agents, and volunteers shall not be liable for any injury/illness suffered by my son/daughter which is incident to and/or associated with preparing for and/or participating in this activity.

I acknowledge that I have carefully read this VOLUNTARY ACTIVITIES PARTICIPATION FORM and that I understand and agree to its terms.

In the event of illness or injury, I do hereby consent to whatever x-ray, examination, anesthetic, medical, surgical or dental diagnosis or treatment and hospital care are considered necessary in the best judgment of the attending physician, surgeon, or dentist and performed by or under the supervision of a member of the medical staff of the hospital or facility furnishing medical or dental services.

Medical Insurance Carrier _____

Policy Number _____

Emergency Contact _____

Parent/Guardian Signature Date

Student Signature Date

A signed VOLUNTARY ACTIVITIES PARTICIPATION FORM must be on file with the Trinity Alps Unified School District before a student will be allowed to participate in the above sports camp.