

**2013 Indian Peaks' Running – Contact, Emergency, and Waiver Information**

Today's Date: \_\_\_\_\_

Athlete Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

**Contact & Emergency Information**

Parent/Guardian Name (-s) \_\_\_\_\_

Day Phone # and e-mail (-s) \_\_\_\_\_

Cell Phone # (-s) \_\_\_\_\_

Home/Other Phone #, e-mail \_\_\_\_\_

Contact if parent/guardian unavailable \_\_\_\_\_ Phone \_\_\_\_\_

Contact if parent/guardian unavailable \_\_\_\_\_ Phone \_\_\_\_\_

**Health Information**

Health Insurance Co \_\_\_\_\_ Group/ID # \_\_\_\_\_

Athlete's Doctor (name, address, phone) \_\_\_\_\_  
\_\_\_\_\_

Athlete's Dentist (name, address, phone) \_\_\_\_\_  
\_\_\_\_\_

List any significant or on-going health conditions of the athlete of which one should be aware at practices, meets, or in an emergency situation (i.e. – asthma, allergies, ADHD, etc):  
\_\_\_\_\_

*I hereby give my consent for medical treatment deemed necessary by physicians for any illness or injury resulting from my athlete's participation in Club activities. I understand this authorization is only valid for situations in which I cannot personally be contacted and/or in the need for immediate treatment.*

Parent/Guardian Name (printed) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name (signature) \_\_\_\_\_ Date \_\_\_\_\_

**Waiver**

*I understand that the Indian Peaks' Running Club does not provide accident insurance for any of its participating athletes. I also understand that I am required to become a member of USATF for such coverage. I will assume responsibility for payment of expenses incurred in the event of injury to my athlete. By signing this, I release Indian Peaks' Running Club, its coach, owners, and members from all liabilities and claims.*

My athlete's USATF membership number is: \_\_\_\_\_

Parent/Guardian Name (printed) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name (signature) \_\_\_\_\_ Date \_\_\_\_\_

**Indian Peaks Cross Country  
Athlete Expectations and Rules  
Fall 2013**

1. All athletes will contact Coach Jen Lavelly in person, by phone, 303-475-3947, or e-mail, jen@indianpeaksrunning.com if unable to attend practice. Please do so the day before if possible. Being at practice is very important!
2. All athletes will be expected to conduct themselves in the same manner as they would if representing their school. This includes a zero tolerance policy for drug/alcohol misuse.
3. All athletes will come to practice prepared – this includes proper running shoes, a watch, work-out gear, water bottle, sunscreen, hat/sunglasses, warm sweat pants and shirt, and a good attitude.
4. Athletes are responsible for team singlet and team clothing.
5. Athletes will be prepared for cross country meets – meet bag, uniform, warm-up gear, water bottle, healthy snacks, sweats, change of clothing, hats, sunscreen, sunglasses, running shoes/racing flats, and a competitive attitude.
6. Athletes will have their own form of transportation to and from practices and meets.
7. Athletes must communicate with their coach immediately about any injury or problems they're having with cross country running.
8. All athletes are expected to show good sportsmanship at all times.
9. Unexcused absences from practices may result in missing a cross country meet.
10. All athletes will maintain good grades in school. School work and performance comes first, which may mean missing practices and/or meets until grades are improved.
11. This is supposed to be fun. If it is not, then please speak with your coach. Running is a lifetime sport and this is just the beginning. Let's make it work for everyone who is interested.

***Happy Running!***

Athlete name \_\_\_\_\_

Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Indian Peaks Running  
Cross Country, 2013**

*Through teamwork and good sportsmanship, participants are introduced to competitive running in an environment that fosters a life-long interest in the sport.*

Welcome! Thank you for joining us for the 2013 cross country season. It promises to be full of fun and running!

**Practices** will be on Tuesdays, Thursdays, and Fridays, 3:45 pm – 5:30 pm, beginning and ending at the Nederland Community Center. There is an after school bus route from the Middle School to the Community Center, so make sure to get on the ‘runners’ bus for practice.

Being **ready for practice** means that athletes will be on time for practice and have a wrist watch; running shoes; appropriate clothing for exercise and our mountain afternoon weather; pre- and post-workout clothing such as sweatsuits; and water and healthy snacks.

We also have a great line-up of **meets** this season; 9/8, 9/20, 10/4, 10/12 and State (date tbd).

**Communication** with Coach Jen will be very important throughout the season. She can be contacted before, during and after practices and anytime via phone/text, 303-475-3947, or e-mail: [jen@indianpeaksrunning.com](mailto:jen@indianpeaksrunning.com).

Our website will be a good source of timely season information as well as e-mail.

Be sure to check our webpage regularly and make sure Coach has your e-mail address (-es).

Please make sure to read and keep in mind the information on the Athletes’ Expectations’ Form as those are important to the strength of our team and practices for the season.

We will be using a number of training tools through the season. To begin, I need every runner to set goals. Please complete, keep the top and detach the bottom of this form, and bring to your next practice.

**HAPPY RUNNING!**

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1. **My goal for this season’s XC practices is:** \_\_\_\_\_  
\_\_\_\_\_

2. **My goal for this season’s XC meets is:** \_\_\_\_\_  
\_\_\_\_\_

3. **My goal for being a student-athlete is:** \_\_\_\_\_  
\_\_\_\_\_

My Name: \_\_\_\_\_

My signature: \_\_\_\_\_

Today’s Date is: \_\_\_\_\_