



March 20, 2011

Dear Parents:

The Virginia Special Forces Track Club will begin its 2011 season on March 22, 2011. Practice will be held on Tuesdays and Thursdays 6:30 p.m. until 8:00 p.m. at the Flexx Sports Center at the National Conference Center in Lansdowne, Virginia and on Sunday's at Briar Woods High School in Ashburn, VA. Registration will conclude April 1, 2011. The session fee for Spring is \$375 (\$300 for siblings) and the same for Summer session. Spring session runs from March 22 – June 14. Summer session runs from June 15 – August 15. Payment will be due no later than 2 weeks from the date that your child begins practice. Registrations done after April 1, 2011 will require payment on the date of registration. Uniforms will be issued to all registered athletes on April 22, 2011. The only exception to the deadline will be for those athletes who are currently participating in High School or Junior High School track programs.

The registration fee for the season is \$210.00 for each athlete. The register covers the following:

- Evaluation - \$35*
- Uniform - \$35*
- Team bag - \$20
- Custom Warm up suit- \$75
- Track meet entry fees (5 meets) - \$25*
- T-Shirt - \$10
- LCPRC Fee - \$10*

Items marked with an * are required fees for Spring 2011.

Virginia Special Forces will accept personal checks for the registration and session fees. Alternatively, if you wish to pay installments of \$125 for the session fees, you may do so using EFT. **Note:** The session fee is \$375. If your child decides not to finish the season, the fee remains your obligation to pay.

Registration fee does not cover 1) USAT&F card; 2) AAU card; and 3) regional and championship meet entry fees. These fees are covered individually. Virginia Special Forces will provide equipment and first aid need for meets. Registrations will not be considered complete until the volunteer form is completed and uniforms will only be distributed after the registration fee has been paid.

All athletes must submit a completed registration form with medical and contact information. All new athletes must submit a **copy** of his/her birth certificate within a week of registration. This will aid the volunteer admin team in getting athletes registered for meets that require proof-of-age. Also, please note that we rely heavily on email and website communication for contacting parents when practices have to be canceled or to provide meet information. The staff and members of the Virginia Special Forces Track Club would like to thank you in advance for your support, time and efforts in making the 2011 season a success. We look forward to “catching a dream” and keeping our young people on the right track.

Guidelines, registration/medical form, meet schedule and other information or updates may be obtained from the club's website at: www.sftrack.org.

Nick Savage
Virginia Special Track Club



**Virginia Special Forces Track Club
Outdoor Track Registration Form 2011**

PLEASE COMPLETE A SEPARATE FORM FOR EACH CHILD YOU WISH TO REGISTER AND PRINT CLEARLY.

If you were **NOT** part of the Spring program last year, include photocopy of birth certificate (or proof of date of birth). Procedure for getting a USATF and AAU Member Number is described on the website Join Us page (www.sftrack.org/joinus.htm).

Participant Information: **Age: (as of 12/31/2011)** _____

Last Name: _____ First Name: _____ Birth date: ____/____/____
(Attach copy of birth certificate if new to spring program)

Address: _____

City/St/Zip: _____ Home Phone: _____

USATF Member Number (from Step A on the "Join Us" page): _____

Parent Information:

Father's Name: _____ Work Phone: _____

Home Address: _____ Cell Phone: _____

City/St/Zip: _____ Home Phone: _____

Your primary email address (es), i.e. those we can use to send important notices to you:
 (DO NOT FILL IN IF YOU DO NOT USE EMAIL REGULARLY)

Mother's Name: _____ Work Phone: _____

Home Address: _____ Cell Phone: _____

City/St/Zip: _____ Home Phone: _____

Emergency Contact Information:

Name: _____ Relationship: _____

Home Phone: _____ Work Phone: _____ Cell Phone: _____

Insurance Information:

Company: _____ Policy Number: _____

Medical Information:

Primary Physician: _____ Phone: _____

General Health:

Please list any allergies, medications, or anything that could inhibit physical exertion.

Further Information:

Currently participating in the following sports (including level)

Previously participated in the following sports (including level) _____

Registration Details:

Program Recommended for athletes seeking track on a full-time basis with a commitment to pursue personal training opportunities, advanced monitoring activities, advanced gear, homecare kits, cross-training sessions. Field trips to view or compete in major qualifiers for the championships (e.g., Penn Relays, USATF, AAU, etc.) Nominal individual entry fees will also be required for District, Regional's and Nationals. Practice 3 days a week.

Spring Season – 2011**Duration and Fees**

March 22 – June 14 – Cost for this session is \$375 (siblings \$300.00) - The fees include approximately 240 hours of coaching.

Additionally, a non-refundable Registration/Activity Fee **\$210.00** (This includes 5 meet entry fees per participant, warm-ups, uniform, t-shirt, bag, evaluation and Loudoun County Parks and Recreation Facility access (**LCPRS sports tax**)).

Spring Payment Total \$ _____

Summer Season – 2011**Duration and Fees**

June 15 – August 15 - Cost for this session is \$375 (siblings \$300.00) - The fees include approximately 240 hours of coaching.

Additionally, a non-refundable Registration/Activity Fee **\$210.00** (This includes 5 meet entry fees per participant, warm-ups, uniform, t-shirt, bag, evaluation and Loudoun County Parks and Recreation Facility access (LCPRS sports tax). [This fee does not apply to spring 2011 athletes])

Summer Payment Total \$ _____

Uniform size (Please box): **Singlet:** Youth: YS YM YL ADULT: S M L XL
(Website shows detailed sizing info.)

Gender (M / F) **Shorts:** Youth: YS YM YL ADULT: S M L XL

Volunteering

The club's coaching staff each donates hundreds of hours to run the club. We need your support in helping maximize the children's experience. Previous coaching experience is not a requirement. Experienced coaches will guide parent volunteers in coaching techniques as required.

**Return this completed form, including USATF Member Number and Check payable to Virginia Special Forces Track Club.
Send to: Virginia Special Forces Track, 611 Talmadge Court, Leesburg, VA 20175.**

Please indicate below the area(s) how you will assist the Club:

Assistant coach	<input type="checkbox"/>	Timer/starter (4-6)	<input type="checkbox"/>
Team mom - communication & coordination	<input type="checkbox"/>	Social activities (5-6)	<input type="checkbox"/>
Uniform administration	<input type="checkbox"/>	Fundraising	<input type="checkbox"/>
Publicity	<input type="checkbox"/>	Liaisons (HS, MS, ES)	<input type="checkbox"/>
Meets Administration (team of 4)	<input type="checkbox"/>	First Aid Assistance	<input type="checkbox"/>

Volunteer Opt Out Section:

I _____ (name) choose not to volunteer and will instead pay to Loudoun Special Forces the amount of \$125.

Note: Registration will not be completed until a volunteer option is selected. Your assistance is needed to ensure a successful track season for your child.

Medical Waiver Information:

I hereby grant permission for my child _____ to participate in all running and conditioning activities (e.g., drills, plyometric training, etc.) of the Loudoun Special Forces Track Club Program. In the event of injury or illness, I hereby grant permission for Loudoun Special Forces Track Club personnel to handle any medical emergencies legally in the case that all emergency contacts cannot be reached. Furthermore, I grant permission for this minor to be taken to the emergency room of a nearby hospital, and the hospital and its medical staff have my authorization to provide treatment which a physician deems necessary for the well-being of this minor. I agree to assume all risks incidental to such participation, including transportation to and from all activities. I hereby waive, release, absolve, indemnify and agree to hold harmless Loudoun Special Forces Track Club, its officials, sponsors, supervisors, board members and persons managing my child.

Parent/Guardian

Signature

Date