



Speed and Agility Clinic

Hosted By: Strength By Struck Athletic Development

March 20, 2010

Blaine Senior High School Field-house

Please Print

Name _____

Address _____

City _____ State _____ Zip _____

Home Phone# _____ Alt. Phone# _____

Parent Email _____

Name of Parent/Guardian _____

Date of Birth _____ Grade _____

In case of **EMERGENCY, PLEASE CONTACT:**

Name & Phone# _____

I, _____ understand that Lee Taft Speed Academy, Inc. Sports Performance Clinic will be inherently vigorous and involves numerous physical demands and therefore may cause injury. I furthermore certify and understand that I am fit and in good physical health and able to participate in Lee Taft Speed Academy, Inc. Sports Performance Clinic. I do hereby release and forever discharge Lee Taft Speed Academy, Inc., its owner and staff from liability for any personal injury or illness, damage or loss incurred while participating in Lee Taft Speed Academy, Inc. Sports Performance Clinic.

I, _____ understand my participation in the Lee Taft Speed Academy, Inc. Sports Performance Clinic is strictly voluntary and may discontinue participation at any time.

Signature _____ Date _____

Athlete:

\$43 if registering before February 26

\$49 from Feb 27 - March 19

\$60 On-site

Coach:

\$23 if registering before February 26

\$29 from Feb 27 - March 19

\$40 On-site

Please send registration and make checks payable to:

StrengthByStruck

11339 Davenport Cir. NE Unit A

Blaine, MN 55449