

**2021 Summer Weight Training and Conditioning**  
**Shawnee Heights High School**  
**Enrollment Form**

1. I will attend or attended school in the Shawnee Heights District.

2. \_\_\_\_\_  
 Student's Name                      Birthday                      Age                      Grade Next Fall

3. \_\_\_\_\_  
 Street Address                      City                      Zip Code

4. \_\_\_\_\_  
 Parent Email Address                      Mother or Guardian's Name                      Contact Phone #

5. \_\_\_\_\_  
 Father or Guardian's Name                      Contact Phone #                      1<sup>st</sup> Emergency Contact and Phone #

**FEE IS \$40 PAID BY CASH OR CHECK # \_\_\_\_\_**

Please circle the payment method and initial \_\_\_\_\_  
Make checks payable to Shawnee Heights School District  
 No refunds after June 10<sup>th</sup>

*Students must arrive to the session on time and dressed ready to work out. They are expected to stay for entire session following the prescribed workout. Students should have arrangements for transportation immediately following the session. For the safety of all participants each session will be limited to 60 students. Students are encouraged to attend the same session each day but can change on days of conflict. Students must follow all rules of the Shawnee Heights Summer Weight Training Program. Failure to meet expectations will result in suspension or dismissal from summer weights.*

**June 1st – July 15<sup>th</sup>**

**Please circle the sessions you plan on attending**

<u>Monday through Thursday</u>	<u>Training Emphasis</u>	<u>Majority of Students</u>
SESSION #1:            6:15 AM – 7:30 AM	Weightlifting, speed & conditioning	High School Males
SESSION #2:            7:30 AM – 9:00 AM	Weightlifting, speed & conditioning	H.S./M.S. Females
SESSION #3:            8:30 AM – 10:00 AM	Weightlifting, speed & conditioning	H.S./M.S. Males
SESSION #4:            10:00 AM – 11:00 AM	Functional Strength	All Ages (Coach Parks led)

**\*All sessions are open to any grade, gender, or sport**  
**\*Summer weights will be closed the week of June 28<sup>th</sup>-July 1<sup>st</sup> (M-Th)**

*I hereby register this person to participate in the Summer Weights Program to be held at Shawnee Heights High School. I acknowledge the expectations set forth in this program. I hereby release the employees and USD 450 from any liability for all injuries or damages while participating or otherwise engaged in any activities connected with the program. The undersigned agrees to assume all risks and recognizes that despite reasonable safety precautions, injury can occur whenever one engages in physical activity. I hereby acknowledge that Shawnee Heights School District provides secondary insurance only. All insurance claims or inquiries concerning insurance coverage due to an injury should be made to USD #450 District office within 30 days of injury. I certify to the best of my knowledge that the participant is physically fit to engage in camp activities. If an emergency arises, I authorize emergency treatment and hospitalization by the camp personnel.*

\_\_\_\_\_  
 PARENT SIGNATURE                      DATE                      STUDENT SIGNATURE                      DATE