



# REC KID FIT MIDDLE SCHOOL BOOT CAMP 2014



~ Boot Camp begins the week of April 7<sup>th</sup> ~

Join us for our First Annual Rec Kid Fit Middle School Boot Camp. Each class will consist of strength training/conditioning and end with a 25-30 minute run/jog. The instructors are friendly energetic people who love fitness and running! Come join us for a 6 week long boot camp to train for Rhody Run. Rhody Run is May 18<sup>th</sup>!

For a more detailed description of boot camp visit our website [www.countyrec.com](http://www.countyrec.com) or find us on Facebook.

- Recommended age 10-14 years old
- Meet at the Rec Center (620 Tyler ST. Port Townsend)
- Classes offered twice a week (Tuesdays and Thursdays) 4:00-5:00
- Please bring proper running shoes, and a water bottle
- The last week of boot camp we will meet at the Larry Scott Trail to do a practice run for the Rhody Run
- Scholarships available – call the Rec Center for an application

**Sign up today, space is limited!**

Step 1: Choose a Boot Camp day (circle one or more)			
<b>Tuesdays 4:00-5:00</b>		<b>Thursdays 4:00-5:00</b>	
Step 2: Weekly/Daily Schedule: (circle the schedule choices that work for you!)			
6 week session (circle below)		Daily (circle below)	
\$30	4:00pm-5:00pm	\$5	Tues    Thurs
-\$5	\$5 sibling discount		
Step 3: Total Boot Camp Fee Due: \$ _____ Cash _____ Check # _____ Date _____			
<i>Checks made payable to: Jefferson County Parks and Recreation</i>			

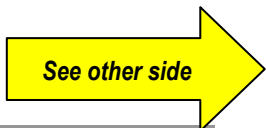
**Registration is complete once payment and signed waiver is received.**

Drop off payment at the Rec Center (620 Tyler Street, PT), or, mail completed form and payment to:

Jefferson County Parks and Recreation/Public Works, 623 Sheridan Street, Port Townsend, WA 98368.

Chris Macklin

[cmacklin@countyrec.com](mailto:cmacklin@countyrec.com) /Voice: 360-385-2221/ Fax: 360-344-3541



**For more boot camp info, call or visit [www.countyrec.com](http://www.countyrec.com)**

Jefferson County Parks and Recreation (JCPR)  
**Rec Kid Fit Middle School Boot Camp 2014**

Participant First Name \_\_\_\_\_ Last \_\_\_\_\_ Age \_\_\_\_ Grade (Fall 13) \_\_\_\_ M\_\_ F\_\_ Birthday \_\_\_\_\_  
Mailing Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_  
Parent/Guardian One First Name \_\_\_\_\_ Last \_\_\_\_\_  
Parent/Guardian Two First Name \_\_\_\_\_ Last \_\_\_\_\_  
Home Phone \_\_\_\_\_ Alternate Phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_  
Allergies/Special Needs \_\_\_\_ If yes, what \_\_\_\_\_  
T-shirt size (circle one)(one shirt per participant) : YS YM YL YXL AS AM AL AXL

**ASSUMPTION OF RISK, RELEASE OF LIABILITY AND CONSENT**

(Please read carefully)

1. All participants are advised that Jefferson County Parks and Recreation Programs (JCPR) may involve some strenuous physical activity. Some (such as sports, games, drills, climbing, hiking, swimming, or running), present a risk of injury higher than that which people normally face in their everyday lives. This risk of injury cannot be wholly relieved by any preventive measures, whether restrictive rules, training, equipment or personal discipline. The decision whether to engage in any particular activity that forms part of the overall program shall be entirely the participant's. Participation in the program in no way obligates anyone to engage in any activity they do not feel they can accomplish.

2. On behalf of my minor child, (or on my own behalf, if an Adult Participant), I expressly acknowledge my full understanding of the risks of injury, including serious injury, disability or death that arise from participation in the JCPR Program. I acknowledge that I have had full opportunity to discuss the nature and extent of these risks with officials of the JCPR in order to inform myself fully on this subject. Based on that full understanding, I freely and knowingly assume all such risks, whether specifically known and unknown. I accordingly assume full and sole responsibility for my (or my minor child's) participation in the JCPR Program. I understand that I must report any existing medical, physical or mental condition which may affect my ability, or the ability of my minor child, to participate in JCPR Program, to the group leader before the program commences.

3. On behalf of myself and on behalf of my minor child (to the extent allowed by law), I hereby release and forever discharge JCPR, and all of the employees, officers, volunteers or agents of those entities, including as well any third party sponsors of JCPR but not limited to damage to property, personal injury, disability or death, resulting from my or my minor child's involvement in any aspect of the JCPR Program. This release applies whether the alleged injuries or damages arise from the negligence of any of the parties released in the previous sentence or not, to the fullest extent allowed by law.

4. To the fullest extent allowed by law, I, for myself and/or my minor child, and for any of our respective heirs, assigns, personal representatives and next of kin, hereby agree to indemnify and hold harmless all the parties released in Article 4 hereof from and against any and all liabilities arising from my participation in the JCPR Program. This undertaking to provide indemnity shall apply to the fullest extent allowed by law, even if the liability asserted against any of the indemnified parties arises wholly or partially from that party's negligence.

5. On behalf of myself and on behalf of my minor child, we have read and understand the Concussion Information Sheet which is available on the Jefferson County Parks and Rec website ([www.countyrec.com](http://www.countyrec.com)) or available at the Rec Center 620 Tyler Street or the Public Works Office 623 Sheridan Street in Port Townsend.

I HAVE READ THIS ASSUMPTION OF RISK, RELEASE OF LIABILITY AND CONSENT. I FULLY UNDERSTAND ITS TERMS AND THAT BY MY SIGNATURE I GIVE UP CERTAIN RIGHTS I MIGHT OTHERWISE HAVE UNDER LAW. I hereby consent to allow my child to participate in the JCPR Program under the terms as set forth in this Assumption of Risk, Release of Liability and consent Agreement. The JCPR Program for which this consent is given is called and is the **Red Kid Fit Middle School Boot Camp 2014.**



Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_ Signature of Participant (18 Years & Older) \_\_\_\_\_ Date \_\_\_\_\_

**PHOTOGRAPH – VIDEO CONSENT**

I hereby grant permission for myself or my child to be photographed or videotaped, without compensation, by JCPR, understanding that the same is intended for publication by print media, INTERNET newspaper, television, video or motion picture. I additionally consent to the use of my name in connection with the publication of photographs/video taken of me.



Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_ Signature of Participant (18 Years and Older) \_\_\_\_\_ Date \_\_\_\_\_