ALGONQUIN TRACK CLINIC



TUESDAY, FEBRUARY 20 – THURSDAY, FEBRUARY 22 12:00PM – 3:00 PM

BOYS & GIRLS GRADES 6, 7, & 8

REGISTRATIONS MUST BE RECEIVED BY FEBRUARY 15TH, 2018

ARHS TRACK CLINIC \$75.00

ONE CHILD PER APPLICATION

Parent's Last Name:	Parent's First Name:			
Mailing Address:		City:	Zip Code:	
Home Phone: ()	_ Cell # ()	E-Mail address:		
Athlete's Last Name:		Athlete's First Name:		
Grade in School	Gender: \underline{M} / F			
Make checks payable to: Algonquin Track Clinic				
Mail to: ARHS Track Clinic C/O Coach Boschetto 58 Pinehurst Ave. Auburn, MA. 01501				
May we use your child's picture:	Yes	No		

Medical Treatment Authorization

I hereby authorize the staff of Algonquin T& F to provide medical care that includes routine m treatment as necessary to my minor son/daught	edical	
Signature:	Date	_
Physical conditions that the staff should be awa	are of (allergies, rec	urring illnesses, disabilities, chronic illnesses, etc.)
Name of family physician:		
Please indicate HMO PPO		
Insurance company name and address		
City	State	Zip
Policy subscribers name:		
Emergency contact name		Phone No.:
H	FEBRUAI	RY 20 - 22

Camp Staff: Andy Boschetto: Head Track Coach Algonquin H. S. Asst. Football Coach

Asst. Football Coach Certified: Bigger Faster Stronger; Certified Throws Coach

Ken Morin

Head Girls Track Coach Algonquin H. S. Head Boy's Soccer Coach - Algonquin H.S. Certified: Bigger, Faster, Stronger

AT THE CONCLUSION OF THE CAMP ADULTS ARE REQUIRED TO PICK UP CAMPERS IN THE GYM.

(no camper allowed to leave the Gym without an adult)

For more info call:

Coach Andy Boschetto: (508)832-8580 Cell# (617) 571-9517 e-mail abcoachtf@gmail.com

Coach Ken Morin: (508) 460-8993 Cell# (774) 248-5266