



AITKIN QUARTERBACK'S CLUB

STRENGTH, SPEED, AND AGILITY

MULTISPORT TRAINING



Monday, Wednesday, Friday

7:00-9:00 A.M.

June 19 – July 28

Aitkin Strength Room

Who: Boys and Girls

Grades: 5-12

Where: Aitkin Strength Room

Cost: FREE

~ Athletes grouped age appropriately

~ Enter through the south doors

IMPORTANT

Parents must complete the release on the back of this flyer before a student participates. Return the waiver to Steffanie Sanford in the strength room when the summer session begins.

VOLUNTEER COACHING STAFF

Shawn Hankel, Jim Harris, Jason Henke, Alan Hills,
Kerry Hopperstad, Jeremy Janzen, Austin Krohn, Larry Liljenquist,
Scott Miller, Steffanie Sanford, Tom Sanford, Sean Smith,
Tate Watts, Stacy Westerlund, Rob Williams



Strength and Honor Lift-a-Thon July 26-27

2017

Quarterback's Club Strength, Speed, and Agility Release Form

Return this release to Steffanie Sanford in the strength room when the summer session begins. This form must be returned in order to participate.

By signing this form, I hereby release, absolve and hold harmless the Aitkin Quarterback's Club and School District 0001, its officers, employees, agents, and volunteers from any damage resulting from an injury incurred by my child while participating in the 2017 Quarterback's Club Strength, Speed, and Agility program. I understand that the Aitkin Quarterback's Club and School District 0001 assumes no responsibility before, during, or after the 2017 Quarterback's Club Strength, Speed, and Agility program.

I do hereby authorize the staff to act on my behalf, according to their best judgement, in an emergency requiring medical attention.

I certify that to the best of my knowledge, this child(ren) is(are) in good physical condition and has no disease or injury that would impair his/her ability to participate in this program.

Students(s)/Grades(s): _____

Parent/Legal Guardian Signature: _____

Printed Parent/Legal Guardian Name: _____

Emergency Contact Name and Number: _____

2nd Emergency Contact Name and Number: _____

Medical Conditions or Allergies include: