



Fall 2008 Field Hockey Clinic
@ Middlebury College

Date: Sunday, September 21, 2008

Location: Peter Kohn Turf Field (use parking area behind Kenyon Arena)

Youth Clinic (K-8th): 11:30am-1:30pm (sticks available for use during clinic)

High School Clinic (9th-12th): 11:30am-3:00pm (bring stick/mouth guard/shin guards)

Coaches Clinic: 1:00-3:00pm (season planning/techniques/tactics/Q&A)

Please note: A completed registration form and release with parent/guardian signature is required for each participant

Player Registration

Full Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Email: \_\_\_\_\_

School: \_\_\_\_\_ Coach: \_\_\_\_\_

Grade: \_\_\_\_\_ Position(s): \_\_\_\_\_

Fee: Checks payable to "Middlebury College Field Hockey Clinic"

- \$20 Youth Clinic
\$25 High School Clinic
\$10 Coaches Clinic

\* Please send registration form with payment to: Middlebury College Field Hockey Clinic, Memorial Field House, Middlebury, VT 05753

\*\* For additional information or to reserve space for a team, please email hhoward@middlebury.edu or call 802-443-2293.

Consent and Release of Liability

(must be completed by parent/guardian)

I, \_\_\_\_\_, approve my child's attendance at the Middlebury College Field Hockey Clinic and certify that she is in good health. If medical attention is required for illness or injury during camp, I grant my permission for such care to be rendered. I hereby recognize and understand that Middlebury College and/or its coaching staff are not responsible for any injury of any kind that may occur while participating in this event.

Date \_\_\_\_\_ Authorized Signature \_\_\_\_\_ Relationship \_\_\_\_\_