

Mission Statement:

**“To provide the Youth of the Cleveland area
with Knowledge, Teamwork, Training, Competition,
and the overall understanding of what running is all about”**

Club Description:

We are a running club for all youths interested in working hard as a TEAM, setting Goals and going after them with everything they have, learning new things every day to help improve themselves. For this second Cross Country Season we are focusing on the group of student-athletes from **Kindergarten through 8th grade.**

Training Dates:

Tuesday and Thursday from 6:00 – 7:30p.m. The schedule will look like the following:

5:55 – 6:00	Arrive
6:00 – 6:15	Warm-up and Drills
6:15 – 7:15	Workout
7:15 – 7:30	Cool-Down and Stretching

*May incorporate weekend practices depending on the final meet schedule.

*Final Meet Schedule is still under review and being coordinated with meet directors.

Participation Fee: Season is \$150 plus the USATF Membership. Uniforms and warm-ups will need to be purchased separately through our supplier. Here is the web page for all purchases:

<https://thetrophyworld.com/collections/cleveland-youth-running>

USATF Registration: This is required with our USATF Club (Cleveland Youth Running Club) the Student Membership is \$25 for the calendar year.

USATF Membership: <https://www.usatf.org/membership/application/index.asp>

Please go to the above web page and complete the individual USATF Membership

(Student), Under the section for **USATF-Registered Club** – Please enter **Cleveland**

Youth Running Club. #18-8101. When you go to page 2, please add my e-mail

(craignieset@gmail.com) as a confirmation e-mail.



Finalize your Registration: Please return all forms via email to (craignieset@gmail.com) by Monday July 12, 2021 with ALL of the following:

1. **Athlete Information Sheet**
2. **Participation Fee - Venmo Account: @Craig-Nieset**
3. **Cleveland Youth Running Club Release Waiver**
4. **Waiver / Release for Communicable Diseases including Covid-19**
5. **Register for USATF Membership**



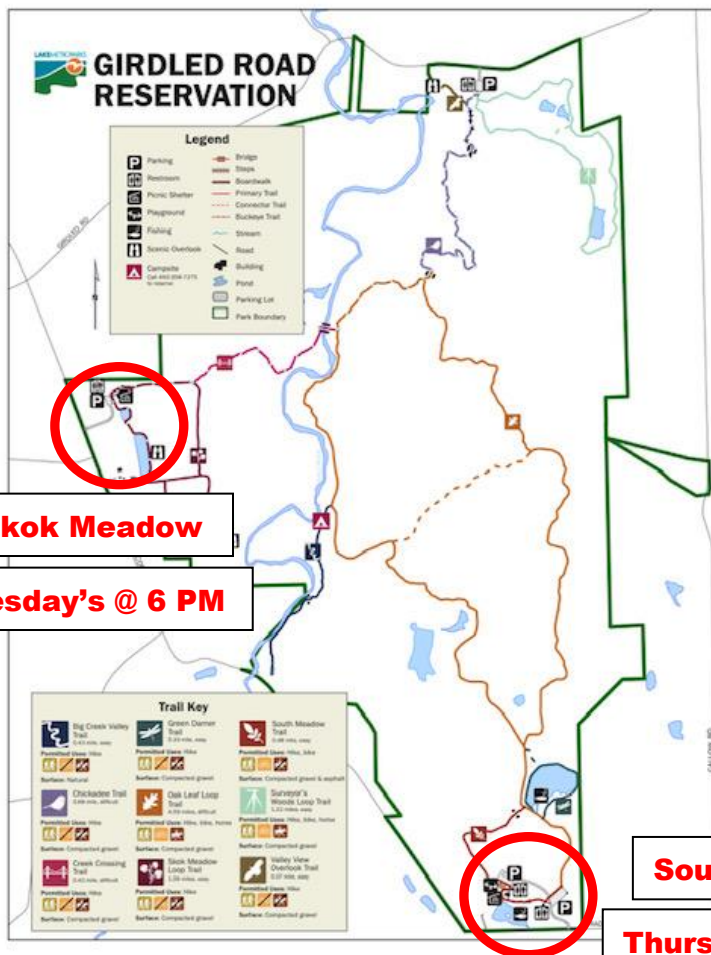
All Communication will go out through the App: BAND

Called: "Cleveland Youth Running Club"




*Once your Complete Registration is received, you will receive a text message to join.



Looking forward to working with the numerous student-athletes that are interested in cross country. Thank you very much for your time and if there are any additional questions, please call me at (440) 231-9839.



LOCATION

-  ~~North entrance
12840 Girdled Rd.
Concord Twp., Ohio 44077~~
-  South entrance
12926 Radcliffe Rd.
Concord Twp., Ohio 44077
-  Skok Meadow
12415 Concord Hambden Rd.
Concord Twp., Ohio 44077

South Entrance

Thursday's @ 6 PM

WAIVER/RELEASE FOR COMMUNICABLE DISEASES INCLUDING COVID-19

ASSUMPTION OF RISK / WAIVER OF LIABILITY / INDEMNIFICATION AGREEMENT

In consideration of being allowed to participate on behalf of **Cleveland Youth Running Club** and related events and activities, the undersigned acknowledges, appreciates, and agrees that:

1. Participation includes possible exposure to and illness from infectious diseases including but not limited to MRSA, influenza, and COVID-19. While particular rules and personal discipline may reduce this risk, the risk of serious illness and death does exist; and,
2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and,
3. I willingly agree to comply with the stated and customary terms and conditions for participation as regards protection against infectious diseases. If, however, I observe and any unusual or significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the nearest official immediately; and,
4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE AND HOLD HARMLESS **Cleveland Youth Running Club** their officers, officials, agents, and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and if applicable, owners and lessors of premises used to conduct the event ("RELEASEES"), WITH RESPECT TO ANY AND ALL ILLNESS, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF RELEASEES OR OTHERWISE, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IF FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

Name of participant: _____ Participant signature: _____

Date signed: _____

FOR PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT THE TIME OF REGISTRATION)

This is to certify that I, as parent/guardian, with legal responsibility for this participant, have read and explained the provisions in this waiver/release to my child/ward including the risks of presence and participation and his/her personal responsibilities for adhering to the rules and regulations for protection against communicable diseases. Furthermore, my child/ward understands and accepts these risks and responsibilities. I for myself, my spouse, and child/ward do consent and agree to his/her release provided above for all the Releasees and myself, my spouse, and child/ward do release and agree to indemnify and hold harmless the Releasees for any and all liabilities incident to my minor child's/ward's presence or participation in these activities as provided above, EVEN IF ARISING FROM THEIR NEGLIGENCE, to the fullest extent provided by law.

Name of parent/guardian: _____ Parent guardian/signature: _____

Date signed: _____

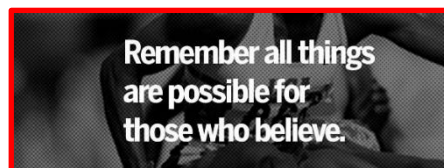
Cleveland Youth Running Club

General Release for Athletic Training



The undersigned is registering individually or as the parent/legal guardian of a minor, child or both. As used on registration form, registrant is an adult registering for an activity individually or as a parent/legal guardian of a minor, child or both. I recognize the possibility of physical injury associated with the participation with Cleveland Youth Running Club. I hereby assume any RISKS and release, discharge and otherwise indemnify the Cleveland Youth Running Club USATF Club, its officers, against any claim for injuries received by the registrant {and/or minor(s)} as a result of participation with Cleveland Youth Running Club, or during transportation to or from practice/competition. The undersigned hereby gives consent for participation with Cleveland Youth Running Club. In addition, the undersigned gives consent for emergency care prescribed by a duly licensed physician or dentist. This care may be given under whatever circumstances necessary to preserve the life, limb or well being of the registrant and or minor(s). In addition, all participants must have medical health insurance.

Date: _____



Name of Athlete/Participant: _____ Date of Birth: _____

Name of Emergency Contact Parent/Legal Guardian: _____

Emergency Contact Cell Phone: _____ Relationship to Minor: _____

Signature (Parent signature if under 18 years): _____



Athlete Information Sheet



Name: _____

Student Cell Phone: (_____) _____

School: _____

Grade: _____

Parents / Guardians Name(s): _____

Parent / Guardian Cell Numbers: (_____) _____, (_____) _____

Emergency Contact: _____

Past History: What are your Personal Best's in the following events:

1 mile (1600): _____ 1.5 miles: _____ miles: _____ 5K: _____

Injuries or Special Circumstances:

Please list any Injury(s) you currently have or have had that may affect your training: _____

Please list any Special Circumstances we need to be made aware of: _____

GOALS: Goals for Cross Country: _____

"Most people run a race to see who is the fastest. I run a race to see who has the most guts."

Pre

