

COACH WALSH'S

2009 Boys Cross Country Summer Training Program

What you need to do in order to participate in this Cross Country summer program:

1. If necessary, contact Coach Walsh – jjwalsh@capousd.org – for additional information.
2. Summer training is geared toward preparing an individual for participation on the Cross Country Team in the Fall. Participation in the summer program, however, in no way guarantees a position on any school team.
3. Complete and mail the Registration Form, the Release of Liability, and payment of \$120.00, made payable by check to **John Walsh**, to 5836 Candlewood Street, Lakewood, CA 90713. **SORRY, BUT NO REFUNDS WILL BE GIVEN.**
4. Show up on time for practice - see the times and dates below - with the necessary gear: quality **running shoes** (not cross trainers, Vans, etc.), appropriate running clothes, digital watch, and a water bottle or some other type of fluid replacement drink (Gatorade, Powerade, Cytomax, etc.).
5. Your training prior to attending summer practice is **VITAL** to success in the summer program and in the potential fall season. You should be able to run continuously (**WITHOUT STOPPING**) at a comfortable pace for at least 45 minutes (preferably an hour), 5 days a week, when you show up to the first summer practice. Time and intensity will build upon that minimum base. If you are able to run for a longer amount of time or at a faster pace, that's great, but you need **at least** that minimum base to prevent injury as the summer progresses. **This training is VERY different from SRLA/marathon training that many of you have done – DO NOT assume that you are ready for cross country just because you finished the LA Marathon. We train more frequently AND at a greater intensity – be ready for it!**
6. **As this camp is not affiliated with Aliso Niguel Cross Country, tryouts will not be held during summer training.**

First Run and Orientation Meeting: Monday, July 13, 7:00 A.M. — 9:00 A.M.

- **Location:** Aliso Niguel High School – 28000 Wolverine Way, Aliso Viejo, CA 92656
 → We will meet in front of the Main Gym/Boys Locker Room.

TENTATIVE Training Schedule:

July 13 – July 24 → M, Tu, Th, Sat (no organized practice Wed/Fri)

Day of week	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Location	ANHS	ANHS	ON YOUR OWN	ANHS	ON YOUR OWN	ANHS
Time	7:00am – 9:00am	7:00am – 9:00am		7:00am – 9:00am		7:00am – 9:00am
Workout Type	Anaerobic/Lactate Threshold	Sprints & Plyometrics	Moderate Intensity Distance	VVO ₂ Workout (High Intensity Repeats)	Easy to Moderate Run	Long Aerobic Run

July 27 – 31 (tentative dates) Coach Walsh's XC Altitude Camp at Big Bear (?) (or other altitude location)
 (Selected Runners Only – usually just top 7 varsity or possible varsity runners)
 ** if this week shifts, then the remainder of the summer may shift by one week
 **This camp is at additional cost to those chosen. Cost and details covered the first week of training or the week prior to camp.

August 3 – 28 → M, Tu, Th, Sat (no organized practice Wed/Fri) 7:00am – 9:00am → ALL PRACTICES @ ANHS
LAST WEEK OF COACH WALSH'S SUMMER TRAINING!!

ANHS Information provided for your convenience: (Remember, summer training is NOT in any way affiliated with Aliso Niguel High School and does not guarantee success at the high school team's tryout in September.)

August 31 – Sept. 4 → Official Aliso Niguel High School Boys Cross Country practice begins – yellow clearance packet **MUST be completed and turned in by August 31.**

Mon., Aug 31 & Tues., Sept. 1 7:00am – 9:00am @ ANHS
 Thurs., Sept. 3 & Fri., Sept. 4 6:15am – 7:45am @ ANHS – Teacher work days (Coach Walsh has teacher duties @ 8am)

Sept. 8 (Tues.) First Day of School - Period 6 Cross Country Class and After School Practices Begin

Sept. 11 (Fri.) Tryout Opportunity #2 – all athletes new on First Day of School AND any others whose fitness/health/safety is questionable (at the Coach's discretion). At this point, all team members will have been selected.

COACH WALSH'S Boys Cross Country Summer Training 2009

Do you want to participate in the summer program?

Fill out the information below and send it, along with the Registration Form, Liability Waiver, and a check for \$120 (payable to John Walsh) to:

John Walsh – Boys Cross Country
5836 Candlewood Street
Lakewood, CA 90713

OR jjwalsh@capousd.org

****THERE WILL BE A PARENT/ATHLETE INFORMATION MEETING ON MAY 18 AT 6:30 p.m. IN ROOM 903 TO DISCUSS CROSS COUNTRY IN GREATER DETAIL. IF YOU HAVE QUESTIONS PRIOR TO THEN, PLEASE CONTACT COACH WALSH AT THE E-MAIL ADDRESS LISTED ABOVE.**

PLEASE make sure that your information contains an accurate e-mail address so that Coach Walsh can send updated information should any of the information in this packet change between now and the first day of summer practice. Thanks!

Runner / Student Information

First Name: _____ Last Name: _____ Grade Next Year: _____

Address: _____

Phone Number(s): _____

E-Mail Address: _____ **(PLEASE INCLUDE THIS INFO!)**

Name of Parent(s) or Guardian(s): _____

Running (or athletic) experience:

Reason(s) for joining the team:

****Include any additional information on the back (alternate addresses or other necessary info)**

WALSH SUMMER CROSS COUNTRY - REGISTRATION FORM

Name: _____ Age: _____

Address: _____

City: _____ Zip: _____

Home Phone: _____

E-mail Address(es): _____

Emergency Contact: _____ Contact Phone: _____

Insurance Carrier: _____

Policy #: _____

Group #: _____

Please note any medical condition(s) and/or allergies of which we should be aware: _____

Make checks in the amount of \$120.00 payable to: **John Walsh**

Please mail Registration Form, Release of Liability, and Check to:

John Walsh
5836 Candlewood Street
Lakewood, CA 90713

Registration deadline:
Wednesday, July 8, 2009

This is not a CUSD sponsored activity. This paperwork was not printed at CUSD expense. Participation in these activities is not a prerequisite for participation in a school-sponsored activity. Participation in these activities does not guarantee a position on any school team. Coach Walsh carries group liability insurance only.

RELEASE OF LIABILITY

1. In consideration of being allowed to participate in the summer training program, running coaching, and outdoor training activities of John Walsh, and to use any facilities, and equipment of John Walsh, Aliso Niguel High School and Capistrano Unified School District at various sites, including without limitation, Aliso Niguel athletic facilities, in addition to the payment of any fee or charge, I do hereby forever waive, release, and discharge John Walsh, Aliso Niguel High School and Capistrano Unified School District and their officers, agents, employees, representatives, instructors, coaches, and all others acting on their behalf from any and all claims or liabilities for injuries or damages to my person and/or property, including those caused by the negligent act of omission of any of those mentioned or others acting on their behalf, arising out of or connected with my participation in any activities, programs or coaching of John Walsh or the use of any equipment at various sites, including without limitation, Aliso Niguel athletic facilities, provided by and/or recommended by John Walsh.

(PLEASE INITIAL: _____)
2. I have been informed of, understand and am aware that strength, flexibility, and aerobic exercise including the use of equipment, are potentially hazardous activities. I also have been informed of, understand and am aware that fitness activities involve risk of injury, including a remote risk of death or serious disability, and that I am voluntarily participating in these activities and using equipment and machinery with full knowledge, understanding the dangers involved. I hereby agree to expressly assume and accept any and all risks of injury or death.

(PLEASE INITIAL: _____)
3. I do hereby further declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation in these activities or use of equipment or machinery. I do hereby acknowledge that I have been informed of the need for a physician's approval for my participation in the exercise activities, programs and use of exercise equipment. I also acknowledge that it has been recommended that I have a yearly or more frequent physical examination and consultation with my physician as to physical activity, exercise and use of exercise equipment. I acknowledge that either I have had a physical examination and have been given my physician's permission to participate or I have decided to participate in the exercise, activities, programs, and use of equipment without the approval of my physician and do hereby assume all risks and responsibility for my participation in said activities, programs and use of equipment.

(PLEASE INITIAL: _____)
4. I understand that providing and maintaining a fitness/running program for me by John Walsh does not constitute an acknowledgement, representation or indication of my physiological well-being or medical opinion relating thereto.

(PLEASE INITIAL: _____)

I have read the forgoing information and understand it. Any questions, which may have occurred, have been answered to my satisfaction. The information that is obtained will be treated as privileged and confidential and will not be released or revealed to any person other than my physician or coach without my express written consent.

Date: _____

Athlete Name: _____

Parent/Guardian Name: _____

Athlete Signature: _____

Parent/Guardian Signature: _____