

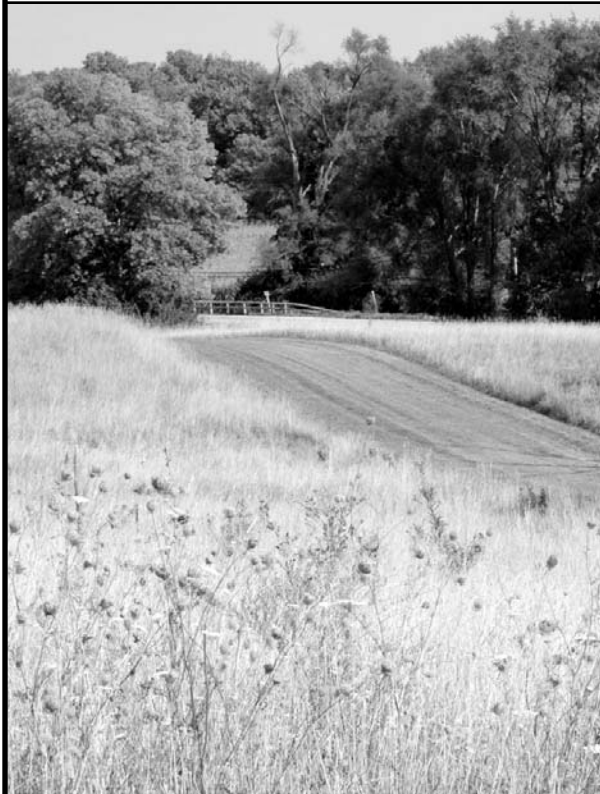
2010 Purdue Distance Camp

July 18-22

Boys and Girls

Ages 12-18

ALL SKILL LEVELS WELCOME



Varsity Cross Country Course

Camp Director Jack Warner

Jack Warner is in his sixth year at the helm of the Purdue University Track and Field and Cross Country programs, beginning his tenure with the Boilermakers in 2004, after serving as an assistant at Big Ten rival Ohio State University for 12 years.

“Jack Warner has had the ideal on-the-job training to be the Purdue head coach, almost since he was a youngster,” said athletics director Morgan Burke, alluding to Warner’s days as a boy, when his father was a Cornell University track and field coach.

Varsity Cross Country Course

Christened on September 8, 2001, with the Purdue Open, the Varsity Cross Country Course is one of only two cross country-specific courses in the Big Ten Conference.

The course is the brainchild of former head coach Mike Poehlein, who served the Boilermaker cross country program from 1973 through 2003. Trying to always advance Boilermaker running on the national scene, Poehlein began the planning for the course in 2000 and construction began within six months.

After the 2001 season, the running course was reconfigured, with the result being the layout that exists today.

In its first two years, the Varsity Cross Country Course served as the host course for the 2001 Indiana Intercollegiates, the 2002 Big Ten Championships, and the 2002 NCAA Great Lakes Regional Championships.

The Varsity Cross Country Course can be set up for races ranging from 4K to 10K, and can accommodate approximately 10,000 spectators alongside the winding running paths.

Coaching Staff:

Director, Head Coach Jack Warner

Purdue Women’s Distance Coach Lisa Senakiewich

Purdue Men’s Distance Coach Conor Holt

Current members of the Purdue Cross Country squads will also be available during the week.

2010 Purdue Distance Camp

Boys and Girls ages 12-18 July 18-22 (all ages and skill levels)

Camp fee: Individual Resident \$430 • Commuter \$380

Team Resident \$380 per camper • Commuter \$330

Your camp week will consist of training on Purdue’s dedicated, picturesque cross country course and trail areas on and around campus, and teaching seminars to give you a better understanding of how to become the complete runner.

Form analysis and technical improvement of your running model will be filmed and critiqued for better running efficiency.

There will be other camp activities planned to make this a pleasurable and exciting week of training.

GENERAL INFORMATION

Costs and Registration

Registration will be from 1-2 p.m. on Sunday, July 18. Campers may choose the residential or commuter option. Residential camp includes room and meals. Commuter campers will attend from 9 a.m. to 9 p.m. and will receive lunch and dinner. This camp is for boys and girls, ages 12-18.

A \$30 late fee will be charged if payment is not received by the registration deadline of July 9. Full refunds will be granted if the request is received in writing one week prior to the start of camp. Purdue University is not responsible for costs incurred due to cancellation.

Campers are expected to attend planned sessions and to comply with the rules and regulations of Purdue University and Purdue Summer Sports Camps.

Location

The camp will be held at the Varsity Cross Country Course, situated just south of the Varsity Soccer Complex at the corner of McCormick Road and Cherry Lane, on the west side of the West Lafayette campus.

Equipment

Campers should bring all running gear. Also, an alarm clock, towels, and a fan can come in handy in the residence hall.

Housing and Meals

Campers, counselors, and staff members will be housed in Cary Quad Residence Hall on the Purdue West Lafayette campus. Rooms are for double occupancy only; linens are provided. Athletes will be assigned a roommate unless one is indicated on the registration form. Roommate requests must be mutual, and registration forms must be returned together. Meals will be provided.

Team Discount

Five or more participants from one team or school must register in order to receive the team discount. Each participant must complete the camper registration form and the physician's approval form. **All teams must submit their forms together with payment.**

Medical Care and Insurance

Medical needs will be administered through the Purdue University Student Health Center, located close to Mackey Arena, or by a member of Purdue's athletic training staff. All campers are covered by a blanket insurance policy covering injuries sustained at camp, up to a maximum of \$15,000 and, in most cases, \$10,000 maximum coverage for illness. Coverage does not extend to preexisting conditions. This coverage does not replace personal health insurance. A licensed physician must sign the registration form (a school medical form signed no more than 12 months prior to camp is also acceptable). No medical forms will be returned. All registrations must include this in order to hold your space.

For More Information

For information on registration, contact:
Lindsay Roberts, Conference Division
Phone: (765) 494-1898 or (800) 319-2197
Fax: (765) 494-0567; E-mail: begleyl@purdue.edu

For information on camp content, contact:

Jack Warner, head coach
Phone: (765) 494-1584; E-mail: jwarner@purdue.edu

Check out our Web sites at:

www.conf.purdue.edu/camps
www.purduesports.com

Registration Form

7550-10YR-LR

2010 Purdue Distance Camp

All information on this form MUST be completed in order to guarantee a place in the camp.

Name _____
Last First Middle Initial

Address _____

City _____

State _____ ZIP _____

Home Phone (_____) _____

School _____

Grade (Fall 2010) _____ Age _____

Gender Male Female

Printed Name of Parent/Legal Guardian (required)

Parent/Legal Guardian E-mail Address – REQUIRED

Roommate Name _____
(Must be mutual. Applications must be returned together. Double occupancy only.)

Coach Name _____

Adult T-Shirt Size: S M L XL XXL

I require auxiliary aids and services due to a disability.
Please contact me at the above address.

Fee Residential Commuter

Individual camper fee \$430 \$380

Team member fee, per person (if five or more register together)

\$380 \$330

If registered after June 9, late fee is \$30

Total Enclosed \$ _____

Payment Method *Payment is required upon submission of registration.*

Send check or money order payable to **Purdue University** or charge

to (check one): MasterCard VISA
 Discover American Express

Account Number _____

Expiration Date _____

Authorized Signature _____

Duplicate this application as needed and return to:

CEC Business Services
Purdue University
Stewart Center, Room 110
128 Memorial Mall
West Lafayette, IN 47907-2034

Fax: (765) 494-0567

Purdue University is an equal access/equal opportunity university.

PARENTAL AUTHORIZATION

All information on this form MUST be completed in order to guarantee a place in the camp.

Purdue University Medical Authorization for Treatment of a Minor (persons under 18 years)

Pursuant to Indiana Code Paragraph 16-36-1-6, I request and authorize the Purdue University Student Health Center, Purdue University Ambulance Service, St. Elizabeth Hospital East, and Clarian Arnett Hospital medical personnel, agents, and employees to provide all reasonably necessary medical care advisable for the health of my child, including but not limited to medical transport, hospital tests, such as pathology, radiology, anesthesia, evaluation and treatment by physicians, including surgery, and prescription drugs. I acknowledge that no representations, warranties, or guarantees can be made with respect to any medical care or treatment provided.

I also understand that, as a result of my child's participation in this program, it will be necessary for supervisors, coaches, residence hall personnel, and others involved with the program to have access to relevant medical information pertaining to my child, and I authorize the use and disclosure of my child's medical information to promote a safe and healthy experience for my child.

Further, I hereby grant permission for my child:

Minor's Name _____ Date _____

to attend the 2010 Purdue Distance Camp by signing below. **A signature from one or both parents/legal guardians and a witness signature is required.**

Signature Parent/Legal Guardian (required)

Signature Parent/Legal Guardian/Witness (required)

PHYSICIAN APPROVAL

I have examined _____ and found him/her to be healthy to compete in track and field and general recreational activities of his/her choosing during the 2010 Purdue Distance Camp.

Medical Conditions _____

Current Medications _____

Allergies _____

Date of Last Tetanus Shot _____
(If date not supplied, child may be required to obtain a tetanus shot if injured.)

Physician's Signature _____

Phone _____

EMERGENCY CONTACT

Contact First - Name _____

Relationship to Participant _____

Day Phone _____

Night Phone _____

Contact Second - Name _____

Relationship to Participant _____

Day Phone _____

Night Phone _____