

Dear Parents,

We are thrilled to introduce a new after-school running club for 3<sup>rd</sup>-5<sup>th</sup> grade girls during the fall and spring seasons this year. ACHDUS Runners will be a wonderful opportunity for girls to learn more about physical fitness and take an active role in their health. During the club meetings, girls will learn the basics of stretching, running, cardiovascular fitness and endurance, while setting goals for continued improvement that will increase self-esteem and confidence.

The club will begin with the start of the 2011-2012 school year, with practices scheduled for Sunday mornings and Wednesdays after school. The Wednesday program will begin immediately after school on campus, and the Sunday program will be held in the mornings at Lerner Park. The program will require a five-week commitment in the fall and a five-week commitment in the spring (spring schedule to follow). Interested students must sign-up for BOTH seasons; this is a one-year commitment.

SCHEDULE OF FALL PRACTICES in September and October:

Sundays: 9:30 – 10:30AM

Wednesday: 3:55 – 5PM after school

Athletic shoes including running shoes, tennis shoes or sneakers (with a tie closure and backing) will be required for participation. The official dress code of the ACHDUS Runners will be in line with Arie Crown's dress code. Any students without the above will be denied participation that day.

The total cost for the 10-week program will be \$25, which includes a long-sleeve team shirt. The program sign-up deadline is September 2; sign up is first-come, first-serve. Weather permitting, the program will take place around the school on Wednesdays, with a rain-day alternate inside the gym. On Sundays, the group will be meeting in Lerner park, weather permitting. (In cold weather, we will still practice outside, so please send jackets as needed.) The ACHDUS Runners is sure to be an experience your daughter will carry with her for years to come! We look forward to working with your daughter(s). If you have any questions, please leave a message at the Arie Crown office for one of our parent volunteers or email [Wendy Margolin](#) or [Rochie Porush](#).

ACHDUS RUNNERS REGISTRATION FORM

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

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

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

Phone: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

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

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ T-shirt Size (S, M, L, XL) \_\_\_\_\_

Yes! I am interested in coaching on  Wednesdays  Sundays  Both days

Emergency Contact:

Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

To ensure the safety of our exercise routines and activities, please list any health problems (asthma, allergies, etc.) that your daughter has and any medications that she is currently taking.

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PLEASE RETURN THIS SIGNED REGISTRATION FORM TO THE FRONT OFFICE WITH THE \$25 PROGRAM FEE. Checks can be made out to Arie Crown.

## STUDENT AGREEMENT OF PARTICIPATION

I agree to abide by Arie Crown's dress code and will wear athletic shoes including running shoes, tennis shoes or sneakers (with a tie closure and backing). I understand that I will be denied participation if I do not have all of the above at practice.

I will do my best to make each practice throughout the fall and spring seasons.

I agree to follow the following ACHDUS Runners Rules:

1. I will not be going home on my bus on the Wednesdays the ACHDUS Runners have practice, but will instead be on the athletic field at 4PM, dressed for practice.
2. I will show respect for the ACHDUS Runners coaches, my teammates and the equipment.
3. I will try my hardest to work toward my goals while having fun!
4. I will listen to the coach's instructions and follow directions.
5. I will come with a positive attitude.

I have enclosed the \$25 fee for the ACHDUS Runners program.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

## PARENT WAIVER

I understand that participation in the ACHDUS Runners program is voluntary and involves rigorous activity. On days when my daughter isn't feeling well, I will not send her to the program.

I agree not to hold Arie Crown program coaches, organizers, school, school administration or any of their board members liable for any claims, damage or injuries suffered as a result of my child's participation.

I authorize the volunteer coaching staff to select and secure medical attention as necessary for my child as a result of injuries or other events requiring emergency care.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_