"Vertical Club" Winter Pole Vault Clinic Series

Presented by......Walk Off Batting Facility, 5 Mary Way, Hainesport, NJ 08036 Near Hainesport-Mt. Laurel Road & Marne Highway intersection (609) 702-5566

The Pole Vault with Nick Tyson

2012 Clinic Schedule

Sunday Group Clinics, 9am-1pm (\$50 per Clinic)

(4 Hours of Open Vaulting & Coaching)
December 11, 18 January 8, 15, 22, 29
February 5, 12, 19, 26 March 4, 11, 18, 25

Wednesday Group Clinics, 6:30-9:30pm (\$40 per Clinic)

(3 Hours of Open Vaulting & Coaching)
December 14, 21, 28 January 11, 18, 25
February 8, 15, 22, 29 March 7, 14, 21, 28



Registration: MUST Pre-Register/Pre-Pay! NO Exceptions!

Age Groups: Boys & Girls, Ages 13 & Up

Location: Walk Off Batting Facility, 5 Mary Way,

Hainesport, NJ 08036

*For Inclement Weather Updates, Call (609) 304-5393

"On The Road" Track & Field World Tour
The ONLY Camp Staffed Exclusively with Olympians!
July 14 & 15, 2012.....Lenape High School, Medford, NJ
For Info & Brochure, visit www.verticaladventures.org

Mail To / Payable To: Mike Pascuzzo, 1 Sheffield Lane, Mt. Laurel, NJ 08054

MPScooze@aol.com / www.verticaladventures.org

Name					Age	Schoo	ol
Address				City		State	Zip Code
Telephone (Cel	l # Prefe	erred) ()			
E-Mail (manda	tory, pl	ease pri	nt clear	ly):			
Sunday Grou	ıp Clin	ics: D	ecemb	er 11 18	January 8	8 15	2229
February 5_	12	_ 19	_ 26	March 4	11 18_	25	x \$50 each = \$
WednesdayG	Group (Clinics	Dece	mber 14 21_	28	January	11 18 25
February 8_	15	22	_ 29	March 7	14 21_	28	x \$40 each=\$_
							Total Enclosed \$

I hereby grant permission for my child to attend the Vertical Adventures 2012 Vertical Club Winter Clinic Series. I verify that my child has had a physical exam in the past year and is able to participate in the activities related to the meet series. I agree to indemnify, hold harmless and defend Vertical Adventures, Michael Pascuzzo, Nickolas Tyson, Walk Off Batting Facility Stevens Management and/or their agents or employees from any and all liability for injury to my child, as well as any injury or damage caused by my child.

Parent or Guardian Signature	Date
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