

## Registration Form

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

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

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

### Please Circle:

Attending: Both Days Just One Day

Grade: (2013-14) 7 8 9 10 11 12

Event: Shot Put/Glide Shot Put/Spin Discus

Shirt Size: S M L XL XXL

Skill Level: Beginner Intermediate Advanced

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School you will be attending in 2013-2014

### Mail registration, waiver, and check, payable to:

Zach Hall

103 East 6th Street

Williamstown, WV 26187

**no later than June 7.**

## Staff:

### Director: Zach Hall

The 2013 season is Coach Hall's third season as the Williamstown High Girls head coach. He has been coaching the throws at the school since 2009.

Under Hall the school has produced 22 state placers, 7 runner-ups, and 3 state champions also 2 state record holders in the shot put.

Prior to coaching Hall a graduate of Williamstown was a state champion/record holder and school record holder at 164'11". Hall continued to throw at WLSC winning a conference title in discus and Javelin. Holds the school record there in the javelin 189'9"

### Jakeb Elliott

HS Pr's of 148'5" and 45'1"

2x state runner up in the discus

5th place at state in shot put

Competes at a Division 1 level

Currently at Winthrop Univ. excelling in discus and the hammer throw

### Mark Britton

One of the Best throwers to come out of the state of WV

Held Pr's of 181'4 and 54'10

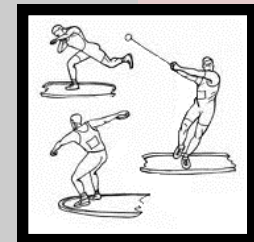
3x state champion in discus

2x state champion in shot put

Currently competes at D-1 Level at Winthrop Univ.

# LAUNCH IT

## THROWS CAMP



June 14-15

8:30—3:00

7th-12th Graders

Williamstown High School Track  
& Field Complex

519 West 5th Street  
Williamstown, WV 26187

### Includes:

- 2 Days or 1 day of Instruction
- Camp T-Shirt
- Shot Put/Discus Training Handouts
- Introduction to Hammer Throw
- Video Analysis of Personal Throw
- NCAA Recruiting Information
- Psychological Aspects of Throwing

**Registration Form, Liability Wavier, and Camp Fee of \$75 for two days or \$50 for one day must be received by Friday, June 7. Any camper registering after June 7 or on day one of camp will not receive a camp t-shirt.**

**Mail checks payable to:**

Zach Hall  
103 East 6th Street  
Williamstown, WV 26187

**Questions, Contact Coach Hall**

westlibthrower@yahoo.com

(304) 483-9988

**Coaches are welcomed**

**\$10 both days**

**Free with any athlete**

**What to Bring**

Athletic Shoes

Throwing Shoes

Implements Label Each One

Water Bottle

Great Attitude!!

***Camp Itinerary:***

**Day 1:**

8:00-8:30: **Registration**  
8:30-8:45 - **Camp Safety & Intro of Staff**  
8:45-9:00- **Dynamic warm-up**  
9:00-9:15- **Throwers warm-up**  
9-15-10:00- **Technique Session #1**  
10- 10:15- **Break**  
10:15-11:00- **Technique Session #2**  
11-11:30- **Group Q's and A's**  
11:30-12:30- **Lunch (included in price)**  
12:30-12:45- **Warm Up**  
12:45-1:15- **"Throwers Challenge"**  
1:15-2:00- **Technique Session #3**  
2:00-3:00- **Weight Room Discussion**  
3:00-3:30- **Q's and A's**  
3:30 **Camp Closure**

**Day 2:**

8:00-8:30: **Registration**  
8:30-8:45 - **Camp Safety & Intro of Staff**  
8:45-9:00- **Dynamic warm-up**  
9:00-9:15- **Throwers warm-up**  
9-15-10:00- **Technique Session #1**  
10- 10:15- **Break**  
10:15-11:00- **Technique Session #2**  
11-11:30- **Group Q's and A's**  
11:30-12:30- **Lunch (included in price)**  
12:30-1:00- **Intro to the Hammer**  
1:00-2:00- **Technique Session #3**  
2:00-3:00- **Camp Competition**  
3:00-3:30- **Q's and A's**  
3:30 **Camp Closure**

**Launch It Throws Camp  
Liability Wavier/Parental Consent**

I hereby grant permission for my child to attend the Launch It Throws Camp. I verify that my child has had a physical exam in the past year and is capable of participating in the activities related to the camp. I agree to indemnify, hold harmless, and defend Zach Hall, Williamstown HS, and or their agents or employees from any and all liability for injury to my child, as well as any injury or damage cause by my child. Should emergency medical treatment for my child should be necessary, I hereby authorize EMS or ED physicians to order and conduct procedures necessary.

**I HAVE READ AND UNDERSTAND THE LAUNCH  
IT THROWS CAMP LIABILITY WAIVER**

\_\_\_\_\_  
Parent /Legal Guardian (Sign) Date

\_\_\_\_\_  
Name of Participant (Please Print)

**Emergency Contact Information:**

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

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

Phone: \_\_\_\_\_

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