

Super Hero Vault!



Sponsored by **KP Athletics**

What: Pole Vault Competition

Where: Rockford HS

4100 Kroes Rd., Rockford, MI 49341

When: Sunday, August 14th 2016

Who: All Pole-Vaulters young and seasoned are invited!

Cost: \$35(includes T-shirt and \$10.00 non-refundable application fee) for all entries post marked no later than August 10th, 2015(late fee is \$10).

Awards for all division winners.

www.grandhavenbeachvault.com

Divisions:

Tentative Time schedule:

Sunday:	10:00a.m.	Ages 14 & Under Boys & Girls
	11:00a.m.	15& 16 Girls
	.	15 & 16 Boys
	1:00p.m.	College/Open/Masters
	2:00p.m.	17 & 18 Girls
		17 & 18 Boys

Your vault may start later but will not start earlier. There will be a 30-min. warm up session between each vault session. If you have any questions please contact:

Coach Kevin Patterson (Rockford) **Phone** 616-560-7204

Email KPATTER341@AOL.COM

Come Vault in your favorite Super Hero get up. Awards for best costume!

Free Food for all contestants(burgers/hotdogs, etc.)

www.grandhavenbeachvault.com



Super Hero Vault Entry Form

(make copies, give one to a friend)

Name _____

Phone _____

Address _____

City _____ State MI Zip _____

Email(printclearly!) _____

Division: _____

Age (day of the vault) _____

Personal best in competition _____

A possible starting height for you: _____

Parental consent/participation waiver:

I hereby grant permission for my child to attend the Super Hero vault. I verify that my child has had a physical exam in the past year and is capable to participate in the activities related to the clinic. I realize that pole vaulting is a potentially dangerous activity that could result in serious injury, paralysis, and even death. I agree to indemnify, hold harmless and defend , Kevin Patterson, Athletics,LLC, volunteers, Plainfield Township, Rockford Public Schools, from any liability and negligence for injury to my child, as well as any child. . I also hereby grant permission to KP Athletics, LLC to use any videotape of myself and/or child related to Super Hero Vault activities for advertising, promotional, sales, or educational video materials.



KP
and/or their employees
injury caused by my
photography and

Participant Signature _____ Date _____

Parental Signature(if under 18)* _____ Date _____

*Single Parental Signature implies consent for both parents and/or legal guardians.

We will contact you via email (preferred) or phone with the exact location and any changes to the schedule.

Entry Fee(includes \$10.00 non-refundable application fee) **(\$35.00)** _____

Late Fee (\$10.00) _____

Total Enclosed

Make all checks payable to: KP Athletics, LLC
62 Chelsea Ct.
Rockford, MI 49341