

Jr. High Girls Cross Country Workouts

Get ready for the fall cross country season!

Summer session designed to help improve your endurance, strength, speed and run technique.

Date: 6/9/09 – 8/21/09

Fee: \$95

Longer, easy runs of 30 to 45 minutes with focus on form and technique.

Structured, higher intensity workouts on Friday mornings to prepare the athlete for fall races.

All workouts are 1 hour in length.

All participants receive a t-shirt & weekly training plan.

All abilities welcomed!

For more information call 281-682-8719 or e-mail: dana@coachlyons.com



Workout Days/Times

Every Tuesday and Friday at 7:00 a.m.

Meet at McCullough Jr. High School

The program is in its 4th year and is led by **Dana Lyons**. Dana has two daughters running cross country and track at The Woodlands HS and McCullough. Dana has been a runner for over 30 years and coaches runners and triathletes.



Please send entry form and check to:
Dana Lyons
71 S. Flagstone Path Circle
The Woodlands, TX 77381

Please make checks payable to Finish Strong Coaching

Or pay online by visiting www.coachlyons.com and click on the Payment tab. Bring completed registration form to the first practice.

Name

School & Grade (2009—2010 school year)

Address

Home Phone

Cell Phone

E-mail

In consideration of your permitting my child, ward or heir to participate in the summer cross country workout program, I, the undersigned, INTENDING TO BE LEGALLY BOUND HEREBY WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES, WHETHER BASED UPON NEGLIGENCE OR ANY OTHER THEORY OF LAW, which I, my child, ward or heir, and our parents, guardians, heirs, executors, representatives, administrators, and assigns may have against Dana Lyons, as well as any other person, entity or sponsor connected to the program, and their heirs, executors, representatives, administrators, successors, or assigns FOR ANY AND ALL INJURIES OR DAMAGES WHICH I, MY CHILD, WARD OR HEIR MAY SUFFER while taking part in such program as a result thereof. Specifically, I verify that my child, ward or heir is in good physical health and able to participate in the program.

Guardian Name (please print)

Parent Signature

Date