

**OKLAHOMA BAPTIST UNIVERSITY POLE VAULT ACADEMY**  
**Registration-Informed Consent and Release**  
**\$30.00 Cash Only**

Camp Date(s): \_\_\_\_\_  
 Name \_\_\_\_\_ Male \_\_\_\_\_ Female \_\_\_\_\_  
 Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 E-mail address \_\_\_\_\_  
 Parents' Names \_\_\_\_\_  
 Home Phone (\_\_\_\_\_) \_\_\_\_\_ Cell Phone(\_\_\_\_\_) \_\_\_\_\_  
 Emergency Phone (\_\_\_\_\_) \_\_\_\_\_  
 Age \_\_\_\_\_ Birthday \_\_\_\_\_  
 HS Graduation Date \_\_\_\_\_ School Name \_\_\_\_\_  
 School Coach \_\_\_\_\_  
 What is your highest bar made? \_\_\_\_\_  
 What size pole do you use? (length & weight) \_\_\_\_\_  
 Your height is: \_\_\_\_\_ Your weight is: \_\_\_\_\_  
 Roommate Preference (Camp Only) \_\_\_\_\_



Pole Vault Academy  
 2509 Sutton Ct.  
 Shawnee, OK 74804

**This form must be completed and submitted with full payment before you will be allowed to participate.**

I hereby grant permission for myself / child to attend Oklahoma Baptist University Vault Academy (OBUVA). I verify that I / my child has had a physical exam in the past year and is capable to participate in the activities related to pole vaulting. I agree to indemnify, hold harmless, and defend Mark Heard, Scott Wilkinson, Oklahoma Baptist University, their agents, employees and sponsors from any and all liability for injury to myself and / or my child, as well as any damage caused by myself and or my child. I understand that track and field, in particular pole vaulting, and many other activities related to OBUVA are potentially dangerous and could pose risk of injury. Should medical attention be necessary, I hereby authorize any physician or trainer selected by academy personnel to conduct medical or surgical procedures. I also agree that if I or my child break a pole we will buy a replacement pole at our own expense. In addition, I hereby grant permission for OBU Vault Academy to use any photographs or videotape of club related activities for the purpose of advertising or educational materials development.

**I HAVE READ AND UNDERSTOOD, AND I AGREE WITH THE INFORMED CONSENT AND RELEASE OUTLINED AS IT RELATES TO MYSELF/SON/DAUGHTER.**

Participant signature \_\_\_\_\_

Parent / Guardian signature \_\_\_\_\_

**Academy Information**  
**Wednesday Evening Session**  
**Nov. 2, 2011 – May 9, 2012**

**Directions**

**From the North:**

From Chandler take Rt. 18 South past I-40. Rt. 18 becomes Harrison Street. Stay on Harrison to MacArthur. At MacArthur turn right (west) to Airport Rd. At Airport Rd. turn left (south) to University Street. At University Street turn left (east). Parking at south lot behind the red track building.

**From the South:**

From US 177 north take Kickapoo Spur exit. Follow Kickapoo Spur east to Airport Rd. At Airport Rd. turn left (north). At University Street turn right (east). Parking at south lot behind the red track building.

**From the East:**

From Eufaula take I-40 West towards Oklahoma City. Exit Kickapoo Ave., go left (south). Stay on Kickapoo Ave. to MacArthur St. At MacArthur turn right (west) to Airport Rd. At Airport Rd., turn left (south). At University Street turn left (east). Parking at south lot behind the red track building.

**From the West:**

From Oklahoma City take I-40 East. Exit Kickapoo Ave., go right (south). Stay on Kickapoo Ave. to MacArthur St. At MacArthur turn right (west) to Airport Rd. At Airport Rd., turn left (south). At University Street turn left (east). Parking at south lot behind the red track building.



**SCHEDULE**

**Facility opens at 6:30 pm**

**Session Starts at 7:00 pm**

**Session Ends at 9:00 pm**

**Payment upon arrival**

**Cash only**