

# WILDCAT YOUTH RUNNING CLUB

2nd-6th graders in Mayfield School District

**Track+Cross Country=Running  
something everyone can do & excel at!**

Mondays & Thursdays, 5:45-6:45 PM  
April 8-May 23 (except 4/22)  
At Mayfield High School Track

\$66-includes t-shirt

Running is can be done anytime, anywhere without a court, a pool, a ball, or a team. This program is designed to introduce the sport of running in a non-competitive environment. All classes will have a warm-up, group runs and end with stretching and cool-down. Participants will learn more about how to run, pacing, racing, and in general how to be more physically fit. Class will take place rain or shine; dress for the outside. Bring a water bottle. Coach: Michele Fortuna. Reg. Deadline: April 4.



[Mayfield.village.parks.recreation](https://www.facebook.com/Mayfield.village.parks.recreation)

**MAYFIELD VILLAGE PARKS & RECREATION DEPT.  
(440) 461.5163  
[MAYFIELDVILLAGE.COM/RECREATION](https://www.mayfieldvillage.com/recreation)**

**Registration Information:**

**Cash, Check (payable to Mayfield Village), MC/Visa/Disc.**

**Online: [mayfieldvillage.com/recreation](http://mayfieldvillage.com/recreation)**

**Phone: 440.461.5163**

**Fax: 440.461.2231**

**Mail/In Person:**

**Mayfield Village Parks & Recreation**

**6622 Wilson Mills Rd.**

**Mayfield Village, OH 44143**

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**Wildcat Running Club Registration Form-Spring 2019. Please print clearly.**

Participant's Name \_\_\_\_\_ D.O.B. \_\_\_\_\_ Gender: M F

Home Phone \_\_\_\_\_ Alt # \_\_\_\_\_

Address \_\_\_\_\_  
(street) (city) (zip)

Shirt Size: YM YL AS AM AL

Parent(s) Email Address(es) \_\_\_\_\_

Credit Card # \_\_\_\_\_ Exp. Date \_\_\_\_\_ Code \_\_\_\_\_  
(mastercard/visa/discover)

I (parent/guardian/caregiver) hereby release and hold harmless the Village of Mayfield including but not limited to the Parks and Recreation Department, Mayfield City School District/Bd. Of Education, and all employees, agents, and representatives from any and all claims, cost, damages, and liabilities for any injuries sustained by myself (parent/guardian/caregiver) or my minor child's or adult's participation in any program offered by Mayfield City School District/Bd. Of Education and Mayfield Village. I (parent/guardian/caregiver) understand that any fees charged for a program do not include accident, or personal property insurance. I further represent that I (parent/guardian/caregiver) and my child/adult are physically capable of participating in the program in which I (parent/guardian/caregiver) or my child/adult are enrolled, based upon consultation with my or my child's/adult's personal physician.

\_\_\_\_\_  
Signature of Participant if over 18 (or Parent or Guardian)

\_\_\_\_\_  
Date