



**SPRING 2010 PERFORMANCE & INJURY PREVENTION CLINIC
PRESENTED BY LEHIGH UNIVERSITY TRACK & FIELD AND THE RUNNING SCHOOL**

LET US TAKE YOU FROM GOOD TO GREAT

WHO: YOU - Be There! All Athletes, Coaches, Trainers, PT's
WHAT: Running & Throws Clinic including:
 - Injury Prevention
 - Running Mechanics
 - Training Methodology
 - Technique Development & Event Specific Preparation
WHEN: Sunday, March 21st, 2010
 12:00 Noon - 5:00 PM
WHERE: Rauch Fieldhouse, Goodman Campus, Lehigh University
WHY: Learn how to train injury free and increase your level of performance
CONTACT: Kelly Lyons at 610-758-6558 - kbl398@lehigh.edu
 Marc Solda- LehighValleyTC@gmail.com
 Updates visit Twitter.com/LVTrackClub

For more information & bios on clinic staff, visit <http://www.lehighsports.com/info/camps/>
 Cost is \$40 per Athlete/ Team Discounts Available

Featuring Jim Wharton

Nicknamed "The Mechanic" by USA Today, Jim Wharton is an internationally known trainer, therapist, and author who established his practice in 1989 and changed the face of human performance. He has worked with luminaries in the sports world from professional football players to Olympic gold medal winners, including Deena Kastor, Meb Keflezighi (winner of the 2009 NYC ING Marathon), Paul Tergat, and the Kenyan and Ethiopian national teams. The Whartons' are also featured in Runners World monthly column the "Body Shop".

LEHIGH UNIVERSITY TRACK & FIELD AND THE RUNNING SCHOOL - 2010 PERFORMANCE CLINIC

Name _____ Age _____ Birth date ____/____/____
 Address _____
 City _____ State _____ Zip _____
 Home Phone _____ Cell Phone _____
 E-Mail _____ Parents Names _____
 *Confirmation will be sent via e-mail
 School _____ Grade _____ Events _____
 Emergency Contact _____ Emergency # _____
 Adult(s) Authorized to Pick Up Camper _____

EVENT SELECTIONS: _____ Running _____ Throws
PAYMENT (Circle one): _____ ATHLETE - (\$ 40) _____ COACH (\$40 OR FREE w/5 Paid Athletes)
TOTAL _____

PAYMENT METHOD _____ MasterCard OR _____ Visa OR _____ Check (Payable to Lehigh University)
 Card # _____ Exp. Date _____