

CAMP FEATURES

- Camp clinics will cover a variety of topics, including running mechanics, nutrition, elements of distance running training, racing tactics, team building and leadership, running shoe selection and motivation.
- Individual attention from experienced college and high school clinicians, counselors and visiting coaches and athletes.
- Finest facilities in the midwest. Campers will run on the Panther Trail (EIU's home cross country course) at O'Brien Stadium (home of the IHSA state track and field championships) at Fox Ridge State Park, and on local city and country running routes.
- Activities include bowling, swimming, and an ice cream social.
- Our goal is for each camper to leave the camp as a more knowledgeable, motivated, and team-oriented runner than when they arrived.

IT'S A RACE!

The Panther Prowl 5K will be run on **SATURDAY MORNING, JUNE 29, 2019.**

Camp fees will cover the cost of entry into the race. A liability waiver is printed in this brochure. **The liability waiver must be filled out and signed along with the Health & Consent Form and application.**

Family and friends are welcome to join us for the race. Bring \$10 and a signed waiver to the race.

CO-ED DISTANCE RUNNING CAMP REGISTRATION: Registration will be held on Tuesday, June 25, 2019 between 1:15-2:15 p.m. in **TAYLOR HALL.**

COST: Overnight is \$340.00. Commuter is \$185.00 (meals not included).

CO-ED DISTANCE RUNNING CAMP DEPARTURE: Camp dismisses on **Saturday, June 29, 2019** with an assembly immediately following the Panther Prowl.

CAMP PERSONNEL

John McInerney, newly inducted into the ITCCCA Hall of Fame, is the former head Men's and Women's Cross Country coach and assistant Men's and Women's Track coach (14 years), will be directing this camp. Under Coach McInerney, the Panther men's cross country team were six-time OVC Champions. The EIU women won their first OVC crown in 2001 earning McInerney Coach of the Year honors on both the Men's and Women's side. **McInerney** was a three-time NCAA Division II All-American in track and cross country while a student at EIU. He ran on Eastern's 1977 NCAA championship cross country team.

Dr. Thomas Woodall is the former Director of the Human Performance Laboratory and the Adult Fitness /Cardiac Rehabilitation Program at EIU. He was Head Cross Country Coach at Eastern Illinois University from 1974 to 1982. **Dr. Woodall** coached 18 cross country All-Americans and was twice named NCAA Division II Coach of the Year. His 1977 team won the National Championship with a record low 37 points.

Dr. Jake Emmett is a Professor of Physical Education at EIU with an outstanding reputation for exercise physiology research, testing and lecturing. **Dr. Emmett** earned his doctorate degree from Penn State and has assisted at the EIU running camp for the past 25 years.

Brad Butler is the current EIU Assistant Cross Country coach. He was a three time Conference Champion for the Panthers and an eight time All Conference runner. He helped the Panthers win six OVC titles. This will be his 21st year at the distance camp, as camper, counselor or coach.

Erin Howarth is the current EIU Head Cross Country coach. Under her direction, the Panthers earned 37 All Conference performances in eight years as head coach. The women's team won their first OVC Championship in 10 years, in 2011, earning Coach Howarth "Coach of the Year" honors. Previously she was the assistant coach at the University of New Mexico and Butler University.

Other coaching staff includes Steve Buti, Highland Park High School Cross Country coach; Jim Wheeler, McHenry High School Cross Country coach; Jason Retz, St Joseph-Ogden High School boys and girls cross country coach; Andy Derks, Plainfield North High School boys cross country coach as well as many current and former EIU distance runners.

PANTHER PROWL PARTICIPANTS ONLY

WAIVER AND RELEASE OF ALL CLAIMS

Please read this form carefully and be aware that in registering yourself or your minor child/ward for participation in the above program(s), you will be waiving and releasing all claims for injuries you or your child/ward might sustain arising out of the above program(s).

"I recognize and acknowledge that there are certain risks of physical injury to participants in the above program(s) and I agree to assume the full risk of any such injuries, damages or loss regardless of severity which I or my child/ward may sustain as a result of participation in any activities connected or associated with any such program(s). I waive and relinquish all claims I or my child/ward may have against the Charleston Playground and Recreation Department and its officers, agents, servants and employees as a result of participation in any of the above program(s). I hereby fully release and discharge the Recreation Department and its officers, agents, servants and employees from any and all claims from injuries, damage or loss which I or my child/ward may have or which may accrue to me or my child/ward in any of the above program(s).

I further agree to indemnify and hold harmless and defend the Charleston Playground and Recreation Department and its officers, agents, servants and employees from any and all claims resulting from injuries, damages and losses sustained by me or my child/ward, and arising out, connected with, or in any way associated with the activities of any of the program(s). For value received, the receipt and sufficiency of which is acknowledged, I consent to being the subject of photographs taken by or on behalf of Charleston Recreation Department, and further consent to the publication, copyright, sale, or any other use of such photographs, regardless of their form or content, for publicity, advertising, trade or any other lawful purpose whatsoever. I further release the Charleston Recreation Department, together with its officers, employees, agents, and assigns, from any and all claims for damages for libel, slander, invasion of privacy or any other claim based on the use of said photographs regardless of their form or content."

"I have read and fully understand the above program details and waiver and release all claims."

CLIP AND ENCLOSE WITH APPLICATION AND HEALTH & CONSENT FORM

SIGNATURE _____
Participant (18 years old, or guardian) Signature

DATE _____

CAMPER'S NAME _____

EIGHT TIME OVC CHAMPIONS

1996, 1998, 2000, 2001, 2002,
2003, 2005, 2011

register online @www.eiupanthers.com

DISTANCE

CAMP & 5K RACE

JUNE 25-29



BOYS & GIRLS GRADES 6-12



EASTERN ILLINOIS.

'19 SPORTS CAMPS

HEALTH & CONSENT FORM

This medical treatment and billing authorization form **MUST** be completed and **SIGNED** by the parent to enable the camper to participate.

Camp Attending _____ Camp Code **DR**
 Camper Name _____ Age ____ Gender ____
 Address _____
 City / State / Zip _____

Emergency Contact Information

Parent / Guardian _____ Relationship _____
 Home Phone _____ Work Phone _____
 Emergency Contact _____ Relationship _____
 Home Phone _____ Work Phone _____

Health Information Does camper have a history of:

Convulsions Heart Defect/Murmur Asthma Chicken Pox
 Diabetes Bleeding Disorder Surgery (past 2 years) Mumps

Brief description of items checked _____

Medications: Type, dosage and frequency (list) _____

Allergies: (medications, foods, stings, other) _____

Insurance Information

EASTERN ILLINOIS UNIVERSITY REQUIRES that all sports campers carry health insurance coverage. The parent/guardian's personal or injury insurance policy will be utilized as the primary insurance for the treatment of injuries and hospitalization for illness or injuries incurred during the sports camps. **If you do not possess health coverage, a temporary policy covering sports camps must be purchased** (through your insurance agent) to cover the camper for the duration of the sports camp. **The name of health insurance carrier and policy number must be written below in order to attend an EIU sports camp.**

Insurance Carrier Name _____

Carrier Address/Phone _____

Policy / Group Number _____

AUTHORIZATION FOR TREATMENT: I do hereby authorize Eastern's athletic training staff to provide first aid, follow-up care and/or referral to Eastern's Health Service Staff, local physician or local hospital for emergency care. Furthermore, I hereby authorize EIU Health Service Staff to provide medical treatment and/or referral for further evaluation and treatment for the above named person in the event this should become necessary while attending camp at Eastern Illinois University.

Signature of Parent / Guardian (required for participation) _____ Date _____

Athletes must come to the Panther Camps physically sound. No preventative taping will be administered for injuries received prior to camp.

EIU SPORTS CAMP INFORMATION

CAMP DATES: June 25-29, 2019 (for boys and girls in grades 6-12). **CAMP CODE: DR**

CAMP REGISTRATION: Registration will be held on **JUNE 25, 2018** between **1:15-2:15 pm** in **TAYLOR HALL** on the campus of Eastern Illinois University.

FACILITIES and HOUSING: The sports camp will be held on the campus of Eastern Illinois University in Charleston, Illinois. All resident campers will reside and eat in on-campus residence halls with qualified counselors. **All residence halls are air conditioned.**

MEALS: The cost of meals is included in camp tuition (**except for commuters**). Commuters may purchase meals at residence halls or other campus facilities.

WHAT TO BRING: Campers should bring bed linens, toiletries, towels, an alarm clock, a good pair of running shoes, appropriate running apparel, bathing suit, and casual clothing. Have clothing marked as the camp is not responsible for lost articles. It is also advisable to bring spending money.

SUPERVISION and SECURITY: Twenty-four hour adult supervision is provided and includes the following: campus security provided by the EIU Police Department, access to medical attention, certified athletic trainers and lifeguard on duty, professional residential supervision, and frequent attendance checks.

CAMP REGULATIONS: Good conduct is expected of all sports camp participants with respect to social and moral responsibilities. General training rules will be in effect for all campers. Any breach in good conduct or training rules (as judged by the sports camp staff) will result in immediate expulsion from camp. Parent/guardian will be notified and are responsible for providing transportation to return the camper home. After on-campus registration has been completed, there will be **NO REFUNDS** for early withdrawals or disciplinary dismissals.

CAMP COSTS: Overnight cost is **\$340.00**. Commuter cost is **\$185.00** (meals not included). 5 or more campers from the same school are eligible for a **TEAM DISCOUNT** of \$15. Applications **MUST** be submitted together as a group.

LIMITED ENROLLMENT: The sports camp size is limited to allow the best possible experience. We urge you to send in your application early.

HEALTH and INSURANCE: Each applicant must have a **Health & Consent Form** signed by a parent/guardian, stating camper is in good health and who to contact in case of an emergency. **This form is included in this brochure.** Form is also available online at **www.eiupanthers.com**. This form must be completely filled out, **signed** and returned to us, along with application. The remaining **BALANCE IS PREFERRED** at least seven (7) days prior to the beginning of camp.

EIU requires that all sports campers carry health insurance coverage. The parent/guardian's personal or injury insurance policy will be utilized as the primary insurance for the treatment of injuries and hospitalization for illness or injuries incurred during the sports camps. The name of health insurance carrier (and policy number) must be written on the **Health & Consent Form** in order to attend an EIU sports camp.

If you do not possess health coverage, or are self-insured, a temporary policy **MUST** be purchased (through your insurance agent) to cover the camper for the duration of the sports camps.

REFUND POLICY: Cancellations made prior to on-campus registration may receive a refund, less **\$50.00**, by submitting a request (in writing) to the athletic office within **30 days** after the first camp day.

After on-campus registration has been completed, there will be **NO REFUNDS** for early withdrawals or disciplinary dismissals.

See you this summer!

FOR MORE INFORMATION:

Panther Sports Camps
 600 Lincoln Avenue
 Eastern Illinois University
 Charleston, IL 61920

INFORMATION BY PHONE:

(217) 581-6647 (Cross Country Office)
 (217) 581-8311 (Panther Camp Office)

BY EMAIL: jpmcinerney@eiu.edu, elhowarth@eiu.edu
VIA THE WEB: www.EIUpanthers.com

REGISTRATION FORM

2019 COED DISTANCE RUNNING CAMP
 CAMP CODE: DR

PLEASE type (or print) legibly on your application WILL NOT be processed correctly. Do not use staples or tape. If necessary, you may duplicate application form.

CAMPER'S NAME: _____

MAILING ADDRESS: _____

CITY / STATE / ZIP: _____

HOME PHONE: (____) _____

EMAIL ADDRESS: _____

SCHOOL ATTENDING: _____

GRADE IN FALL, 2019: _____

GENDER OF CAMPER: MALE FEMALE

ROOMMATE REQUEST: _____

ADULT T-SHIRT SIZE (CIRCLE ONE):
 S M L XL XXL

PARENT/GUARDIAN NAME: _____

CHECK CAMPER(S) ATTENDING:
 JUNE 25-29, 2019 (GRADES 6-12):

Overnight Camper - \$340.00 (CAMP CODE - DR)

Commuter Camper (no meals) - \$185.00 (CAMP CODE - DR)

PAYABLE TO: Eastern Illinois University
MAIL TO:

Panther Sports Camps,
 600 Lincoln Avenue, Eastern Illinois University,
 Charleston, IL 61920
 Please include **CAMPER'S NAME**
 and **CAMP CODE** on memo line of check.

As parent/guardian, I have read and hereby accept the conditions described in this brochure. I also understand that EIU Panther Sports Camps retains the rights to use photographs of campers taken at camp for publicity and/or advertising purposes.

SIGNATURE OF PARENT / GUARDIAN

AMOUNT ENCLOSED: \$ _____