

# South Metro Throws Club 2023



This throws club is designed to help throwers of all levels improve their shot put and discus technique.

Camp Coaches:

**Jon Flatness, Prior Lake, Logan Hussung, Farmington, Rick Ringeisen, Lakeville South, Josh Wolter, Lakeville North, Ben Bauer, Lakeville South, and other special guests.**

**Throwers and coaches from other schools/universities are welcome to attend the SMTCC. Follow @JonFlatness on TWITTER for inclement weather cancellations and other notifications.**

**Practice Nights will run from 6:00 to 7:30 PM, at Prior Lake High School**

**Wednesday, June 14, 2023**

**Wednesday, June 28, 2023**

**Wednesday, July 19, 2023**

**Wednesday, June 21, 2023**

**Wednesday, July 12, 2023**

**Wednesday, July 26, 2023**

**\*\* Note: There will be no camp on Wednesday, July 5**

There will be **NO FEE** to join & participate in the South Metro Throw Club. Athletes are asked to log on to [www.usatf.org](http://www.usatf.org) and join USA Track & Field. The fee to join USA Track & Field is \$25.00 plus a small transaction fee. By joining USA Track & Field athletes will also have a general liability insurance policy that will cover potential injuries. See link for more info:  
<https://www.usatf.org/home/top-utility-nav-content/membership/individual-youth-membership>

**Athletes this year are required to become a member of USATF and show proof of membership along with signing the waiver and release of liability form at the bottom of this document.**

Sincerely,

Coach Ringeisen, Coach Flatness, Coach Hussung, & Coach Wolter

South Metro Throws Club

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## **PERSONAL/PARENTAL WAIVER AND RELEASE OF LIABILITY**

I, the undersigned, parent (or legal guardian), acknowledge the inherent risk involved in the sport of Track & Field relating to the throws events of shot put and discus. I acknowledge and fully understand that I (or child) will be engaging in activities that involve risk of injury that might result from my (or my child's) actions, in action, or negligence of others. I also acknowledge the inherent risk of disease transmission. I acknowledge and fully understand that I (or my child) will be engaging in activities that involve risk of injury or illness that might result from my (or my child's) actions, in action, or negligence of others. On behalf of myself (or my child) I agree to assume all the foregoing risk and accept personal responsibility for my damages, injuries and or illness.

Name of Participant (printed): \_\_\_\_\_

Signature of Participant (if over 18): \_\_\_\_\_

Signature of Parent/Legal Guardian if participant under 18: \_\_\_\_\_

Printed name of Parent or Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Emergency Contact Number: \_\_\_\_\_