



# **SHOCKER TRACK CLUB**

**2016 - 2017 YOUTH and OPEN INDOOR SEASON  
PARENT INFORMATION and ATHLETE REGISTRATION FORMS**

## **POLE VAULT**

**USD 259 Northeast Magnet High School  
Two (2) Pits and Swimming Pool Practice**

**USA Track and Field Member Club**



**Dated October 26, 2016**

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**Shocker Track Club, Inc.  
c/o Wichita State University Track and Field  
1845 Fairmount  
Wichita, Kansas 67260-0018  
(316) 978-5544**

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## ABOUT THE **SHOCKER TRACK CLUB**

### Who We Are

The **Shocker Track Club (STC)** was formed in 2011 and is a 501(C)(3) Non-Profit Organization as defined by the I.R.S. STC is governed by a volunteer Board of Directors. Its primary function is to provide Officials and Volunteers for Wichita State University Track and Field and Cross Country, and its own, track meets. STC additionally supports athletics teams for Youth (athletes between the ages of 5 and 19), Open (for athletes between the ages of 19 and 29), Masters (for athletes over the age of 30), and Elite (for athletes that are high achieving and typically post collegiate).

### Affiliation

**Shocker Track Club** is a USA Track and Field Member Club and a member of the Missouri Valley Association. We STRONGLY encourage all athletes to purchase a USATF membership at [www.usatf.org](http://www.usatf.org)

### Youth Track Team

The **Shocker Track Club** Youth Team operates under the auspices of the STC Board of Directors and is managed by a Director and Assistant Director that are members of the Board of Directors. STC is the only club in the region that is a USATF Member Club, can provide coaching and training in every event, is affiliated with a NCAA Division I university, and has Coaches with NCAA Division I, II, or NAIA athletic or coaching experience. Separate indoor and outdoor seasons provide opportunities for nearly eight months of training.

### Youth Team Mission Statement

The Mission of the **Shocker Track Club** Youth Team is to provide opportunities for youth to compete in track and field from an introductory level, to high-level competition, under the framework of USATF guidelines.

### Participation Eligibility

This pole vault program is for athletes above the age of 12. If an athlete is also participating in a KSHSAA affiliated high school or middle school, the athlete may not participate with **Shocker Track Club** DURING the school season. Home school or Middle school athletes that choose not to participate with their school's team may participate. If your school is not KSHSAA sanctioned, the athlete can participate with Shocker Track Club.

### About this Document

Carefully review this document. It contains important information for your reference during the outdoor season. Pages 1 through 7 are yours to keep. Pages 8 through 12 must be completed and returned with your registration payment.



## 2016 - 2017 Shocker Track Club Youth and Open INDOOR Pole Vault Team TEAM MEMBERSHIP REGISTRATION OVERVIEW

### INFORMATIONAL MEETING

Thursday, October 27, 2015 at 700p  
USD 259 School Service Center – 3850 North Hydraulic

### REGISTRATION FEES and FEE PAYMENT DUE DATES

\$160 for base registration fees  
(*\$20 additional for 2017 USATF annual memberships – HIGHLY RECOMMENDED*)  
FEES ARE TO BE PAID ALL AT ONCE IN CASH or CHECK - NO REFUNDS AFTER 2<sup>ND</sup> PRACTICE

### ALL FULL SEASON REGULAR FEES INCLUDE

Practice Time and Coaching  
STC Team Shirt and Beanie Cap - To Help Us With T-Shirt Orders join by November 11, 2016  
Free Participation in STC Bill Butterworth Masters Indoor Track Meet on January 28, 2017

### REGULAR FEES DO NOT INCLUDE

Any Meet Entry Fees (EXCEPT for STC Bill Butterworth Indoor Masters Meet on January 28, 2017)  
USATF Membership  
Parent T-Shirt (\$18) and STC Team Competition Jersey (\$15)

### FINANCIAL SUPPORT PROGRAM

Athletes in need of assistance are encouraged to apply for grants through the Genesis Foundation for Fitness and Tennis. Details are available at <http://www.genesisfoundationwichita.com>  
**Shocker Track Club** has developed a program to provide limited financial support for athletes in need.  
See the Director or Assistant Director for details.

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### PRACTICE LOCATION

Practices will be held at the USD 259 Northeast Magnet High School Gymnasium  
5550 N. Lycee in Bel Aire, Kansas (just east of 53<sup>rd</sup> Street North and Rock Road)

### SCHEDULED PRACTICE TIMES AND DATES

**Tuesdays and Thursdays – 6:30 p.m. to 8:30 p.m. // Saturdays 1:00 p.m. to 4:00 p.m.**

November – 3, 5, 8, 10, 12, 15, 17, 19, 29 – (9 days)

December – 1, 3, 8, 10, 13, 15, 17 – (7 days)

January – 5, 7, 10, 12, 14, 17, 19, 21, 24, 26, 31 – (11 days)

February – 2, 4, 7, 9, 11, 14, 16, 18, 23, 25 – (10 days)

### Optional Pool Practice Dates

Northeast Magnet High School Swimming Pool  
November 19, December 17, January 21, February 18



## 2016 – 2017 Shocker Track Club YOUTH and OPEN Indoor Team

### TRACK MEETS

#### OPTIONAL PARTICIPATION

All track meets are optional.

Your child can participate in any, or all, of the meets.

The cost of each track meet ranges from \$8.00 to \$15.00.

Assistance can be provided in registering your child for meets.

Parents are responsible for transportation to and from meets.

#### USA TRACK and FIELD MEETS

*If you desire to have your child compete in USATF Meets WE will purchase:*

*USATF Youth Membership \$20 [www.usatf.org](http://www.usatf.org) (Assign your child to Club 28-4080)*

#### FOR USATF MEMBERSHIPS

To verify an athlete's date-of-birth, parents must forward a scanned copy of your child's birth certificate to [youth@missourivalley.usatf.org](mailto:youth@missourivalley.usatf.org)

USA Track & Field will contact youth members directly to provide important membership information.

#### TENTATIVE SCHEDULED MEETS

**Shocker Track Club Coaches WILL be in attendance at the following meets –**

January 13-14, 2017 – Reno, Nevada; National Pole Vault Summit (Youth of all ages)

January 20, 2017 - Kansas State University (high school athletes ONLY)

January 28, 2017 - Shocker Track Club Bill Butterworth Masters Indoor (Pole Vault and Running Events ONLY)

January 29, 2017 - University of Kansas (high school athletes ONLY)

#### OTHER TRACK MEETS

**Shocker Track Club Coaches WILL NOT be in attendance at the following meets –**

January 14, 2017 – University of Arkansas - Fayetteville, Arkansas

January 21, 2017 – Pittsburg State University – Pittsburg, Kansas



## **2016 - 2017 Shocker Track Club YOUTH and OPEN Indoor Team GENERAL INFORMATION and EXPECTATIONS**

### **Governance and Oversight**

The Shocker Track Club Youth Team operates under the auspices of the Shocker Track Club Board of Directors. Separate indoor and outdoor seasons provide opportunities for nearly eight months of training.

### **Mission Statement**

**The Mission of the Shocker Track Club Youth Team is to provide opportunities for youth to compete in track and field from an introductory level, to high-level competition, under the framework of USATF guidelines.**

### **Participation Eligibility**

This program is for youth athletes above the age of 12, and College, Open, and Masters athletes of any age. If an athlete is also participating in a KSHSAA affiliated high school or middle school, the athlete may not participate with Shocker Track Club DURING the school season. Home school or Middle school athletes that choose not to participate with their school's team may participate. If your school is not KSHSAA sanctioned, the athlete can participate with Shocker Track Club.

### **Participation Conditions for Athletes**

We have a VERY clear and specific vision and mission about what youth track and field practices should be and about what youth and adult behavior should be. Participation by the athletes and parents is strictly voluntary. Anyone who finds our vision and methods incompatible with their own should reconsider participating. Shocker Track Club is about development of character, respect, friendships and teamwork. We will NOT compromise these principles at any time. Athletes are expected to support teammates at all times. We will teach and expect positive behavior at all times. Mistreating or making fun of teammates will not be tolerated. Athletes are expected to be attentive and not disruptive. ANY disruptive behavior will result in being dismissed from practice. Continued disruptive behavior may warrant dismissal from the team.

### **Participation Conditions for Parents**

The Director and Assistant Director are in charge of the Youth program. Coaches are in charge of practices. What they say goes! If you have questions about an aspect of the program, you are strongly encouraged to contact the Youth Team Director or Assistant Director. An athlete or parent that fails to comply with the coaches' estimation of what these principles entail, will be counseled. Any repetition of behavior will result in being expelled from practice and/or from the team. When we participate in events, we expect the officials of the event to be treated with complete respect and appreciation. If there is an issue with the officials, simply contact one of the Shocker Track Club coaches. The coaches will handle ALL issues with the officials.

### **Keeping You Informed**

Brief parent meetings may be held before each practice. A team newsletter will be issued bi-monthly via email. STC maintains a website – [www.ShockerTrackClub.com](http://www.ShockerTrackClub.com), two Youth Facebook pages (Shocker TC – Youth and Shocker Track Club Youth Team), and will also have a Twitter account. If you have questions about an aspect of the program, you are strongly encouraged to contact the Youth Team Director or Assistant Director.



## 2016 – 2017 Shocker Track Club Youth and Open Indoor Team

### MEMBERSHIP OVERVIEW

## 2016 - 2017 TEAM LEADERSHIP

### About Our Leadership Members and Coaches

All STC Leadership Members and Coaches have completed a Shocker Track Club Leadership/Coach Application, are USATF Members, have passed a USATF background check, and have completed the United States Olympic Committee (USOC) SafeSport Training

#### Head Pole Vault Coach

Denis Fraizer (Phone – 316-680-0852) ([polevault@shockertrackclub.com](mailto:polevault@shockertrackclub.com))

CPR/AED Certified

*Former Wichita State Pole Vaulter and current GWAL Pole Vault Coach*

#### Assistant Pole Vault Coaches

Andrew Brown

*Former University of Nebraska at Kearney Pole Vaulter*

Caydrick Bloomquist

*Former Southwestern College Pole Vaulter*

Jaimie Bookout

*Former University of Kansas Pole Vaulter*

Travis Ford

*Former Wichita State and Fort Hays State Pole Vaulter and current High School Coach*

Ken Wheeler

*Really Cool Dad!*

#### STC President and Team Parents

Darren Muci (Phone – 316-993-6824) ([president@shockertrackclub.com](mailto:president@shockertrackclub.com))

Gilda Muci (Phone – 316-990-6824) ([gbmuci@gmail.com](mailto:gbmuci@gmail.com))



## KSHSAA RECOMMENDED CONCUSSION & HEAD INJURY INFORMATION RELEASE FORM 2016 - 2017

### **All student athletes and parents/guardians must review this form before the student participates in any athletic practice**

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly. In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

### **What can happen if my child keeps on playing with a concussion or returns too soon?**

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one (second impact syndrome). This can lead to prolonged recovery, or even to severe brain swelling with devastating and even fatal consequences. It is well known that adolescent or teenage athletes will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for student-athlete’s safety.

### **Symptoms or Signs May Include One of More of the Following**

Headaches, “Pressure in head”, Nausea or vomiting, Neck pain, Balance problems, dizziness, Blurred or double or fuzzy vision, Sensitivity to light or noise, Feeling sluggish or slowed down, Feeling foggy or groggy, Drowsiness, Change in sleep patterns, Amnesia, “Don’t feel right”, Fatigue or low energy, Sadness Nervousness or anxiety, Irritability, More emotional, Confusion, Concentration or memory problems, (forgetting game plays), Repeating the same question or comment, Appears dazed or vacant facial expression, Confused about assignment, Forgets plays Is unsure of game, score, or opponent, Moves clumsily or displays incoordination, Answers questions, slowly, Slurred speech, Shows behavior or personality changes, Can’t recall events prior to hit or after hit, Seizures or convulsions, Any change in typical behavior or personality, Loses consciousness.

### **If you think your child has suffered a concussion**

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after sustaining a concussion, regardless of how mild it seems or how quickly symptoms clear, without written medical clearance from a Medical Doctor (MD) or Doctor of Osteopathic Medicine (DO). Close observation of the athlete should continue for several hours. You should also inform your child’s coach if you think that your child may have a concussion Remember it is better to miss one game than miss the whole season. When in doubt, the athlete sits out!

### **Cognitive Rest & Return to Learn**

The first step to concussion recovery is cognitive rest. This is essential for the brain to heal. Activities that require concentration and attention such as trying to meet academic requirements, the use of electronic devices (computers, tablets, video games, texting, etc.), and exposure to loud noises may worsen symptoms and delay recovery. Students may need their academic workload modified while they are initially recovering from a concussion. Decreasing stress on the brain early on after a concussion may lessen symptoms and shorten the recovery time. This may involve staying home from school for a few days, followed by a lightened school schedule, gradually increasing to normal. Any academic modifications should be coordinated jointly between the student’s medical providers and school personnel. No consideration should be given to returning to physical activity until the student is fully integrated back into the classroom setting and is symptom free. Rarely, a student will be diagnosed with post-concussive syndrome and have symptoms that last weeks to months. In these cases, a student may be recommended to start a non-contact physical activity regimen, but this will only be done under the direct supervision of a healthcare provider.

### **Return to Practice and Competition**

The Kansas School Sports Head Injury Prevention Act provides that if an athlete suffers, or is suspected of having suffered, a concussion or head injury during a competition or practice, the athlete must be immediately removed from the competition or practice and cannot return to practice or competition until a Health Care Professional has evaluated the athlete and provided a written authorization to return to practice and competition. The KSHSAA recommends that an athlete not return to practice or competition the same day the athlete suffers or is suspected of suffering a concussion. The KSHSAA also recommends that an athlete’s return to practice and competition should follow a graduated protocol under the supervision of the health care provider (MD or DO).

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/concussion/HeadsUp/youth.html> <http://www.kansasconcussion.org>



# Shocker Track Club Youth/Open Pole Vault Registration Form 2016 – 2017 Indoor Season

## ATHLETE INFORMATION (please print)

**YOU MUST HAVE A COPY OF YOUR CHILD'S BIRTH CERTIFICATE IF YOUR CHILD WILL COMPETE IN USATF TRACK MEETS.**

Athlete Name:	M or F	Email
Birthdate:	Age:	Size (circle): Youth/Adult S M L XL 2X

Athlete #2 Name:	M or F	Email
Birthdate:	Age:	Size (circle): Youth/Adult S M L XL 2X

Athlete #3 Name:	M or F	Email
Birthdate:	Age:	Size (circle): Youth/Adult S M L XL 2X

Athlete #4 Name:	M or F	Email
Birthdate:	Age:	Size (circle): Youth/Adult S M L XL 2X

## PARENT/GUARDIAN INFORMATION

Parent (s)/Guardian Name:		
Current Address:		
City/State/Zip		
Home Phone:	Work:	Cell:
Email:		

Emergency Contact:		
Home Phone:	Work:	Cell:
Email:		

MY CHILD WILL BEGIN PRACTICE IN (Circle) – NOVEMBER or DECEMBER (Cost is \$160) or JANUARY or FEBRUARY (Cost is \$110)		
Method of payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check/Money Order _____		
Please make checks/money orders payable to "Shocker Track Club"		
Parent Signature: _____		Date: _____
SHOCKER TRACK CLUB USE ONLY! CHECK NUMBER	AMOUNT	DATE



## Shocker Track Club

### 2016 – 2017 INDOOR Youth/Open Pole Vault Team ATHLETE RELEASE FORM

Athlete's Name \_\_\_\_\_ Date \_\_\_\_\_

#### Public Release Form

I give permission to the Shocker Track Club to use my name or my child's name, picture, or statement for the purpose of promoting, advertising, and raising money for the Shocker Track Club.

\_\_\_\_\_ (Initial)

#### Parent's Responsibilities

Parents are important to the success of the athlete and the track club. Therefore, we ask the parents to observe the following guidelines:

- ❖ Maintain a positive attitude
- ❖ Realize that once an athlete is at a given facility, they are under the supervision/jurisdiction/guidelines of the coaching staff
- ❖ Insure that the athlete is at practice and at meets on time
- ❖ Provide transportation for the athlete to and from practice and meets or arrange carpooling
- ❖ Remain in the seating area at practice and meets

\_\_\_\_\_ (Initial)

#### Athlete's Responsibilities

Athletes represent our organization, the coaching staff, their families, and themselves. We expect all athletes to observe the following guidelines:

1. Respect others and their property including your coaches (and their decisions)
2. Accept constructive feedback
3. Put forth a 100% effort during practice and meets
4. **BE ON TIME** and stay in assigned areas
5. Eat properly. Junk food (pop, candy, chips, cookies, etc.) is not allowed before or during practice or at meets.
6. Attend all practices and meets
7. Compete in assigned or designated events
8. Use appropriate language at all times (Inappropriate language will not be tolerated)
9. Avoid the use of illegal drugs and alcohol
10. Avoid fighting

\_\_\_\_\_ (Initial)

#### Medical Conditions

No \_\_\_\_\_ Yes \_\_\_\_\_ Condition \_\_\_\_\_

Medication or Special Attention Required? \_\_\_\_\_

\_\_\_\_\_ (Initial)



## Shocker Track Club

### 2016 – 2017 Indoor Youth/Open Pole Vault Team MEDICAL RELEASE FORM

I, \_\_\_\_\_ (Parent/Guardian's Name) hereby give permission for  
any and all medical attention to be administered to my child \_\_\_\_\_.  
any and all medical attention to be administered to my child \_\_\_\_\_.  
any and all medical attention to be administered to my child \_\_\_\_\_.  
any and all medical attention to be administered to my child \_\_\_\_\_.

I have reviewed the KSHSAA Concussion Form. Additionally, in the event of accident, injury, sickness, etc., under the direction of the person(s) listed below, until such time as I may be contacted, I also assume the responsibility for the payment of any medical treatment. This release is effective as long as my child is a member of the Shocker Tracker Club.

**ADDRESS:** \_\_\_\_\_

**HOME PHONE:** \_\_\_\_\_

**INSURANCE COMPANY:** \_\_\_\_\_

**POLICY NUMBER:** \_\_\_\_\_

**In case I cannot be reached, any of the following persons is designated to act on my behalf:**

**PHYSICIAN:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

**KNOWN ALLERGIES:** \_\_\_\_\_

**SIGNATURE (PARENT/GUARDIAN):** \_\_\_\_\_

**DATE:** \_\_\_\_\_



**SHOCKER TRACK CLUB  
ATHLETE RECITAL**

This document is an agreement between the Shocker Track Club and \_\_\_\_\_

As part of the Shocker Track Club you are a representative of the Club. Your actions can affect the way other individuals view the Club. As such it is expected that you portray yourself in a way that is not detrimental to the Club. You are expected to conduct yourself in a manner that represents the Shocker Track Club in a positive manner.

Criminal activity of any kind will not be tolerated. If the Club discovers that you are involved in any criminal activity you will be removed the Club.

The Shocker Track Club reserves the right to terminate your participation should it find that your participation would negatively impact the Club.

If you wish to participate with the Shocker Track Club you must agree by initialing the following:

\_\_\_\_\_ 1. I agree to represent the club the Shocker Track Club in a positive manner and I will conduct myself in a manner that is representative of the values of the Shocker Track Club.

\_\_\_\_\_ 2. I will not put myself into a situation were criminal activity could occur.

\_\_\_\_\_ 3. I will respect the Coaches and follow their rules that are set out for my participation in the Shocker Track Club.

\_\_\_\_\_ 4. I will not intentionally cause damage to any of the equipment or facilities that I am allowed to use as part of the Shocker Track Club.

\_\_\_\_\_ 5. I understand that if I do not fulfill my part of this contract I will be removed from the Shocker Track Club.

By signing this document you agree to the terms set forth above.

Youth Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_

Athlete Parent/Guardian \_\_\_\_\_ Date \_\_\_\_\_

Adult Athlete Signature \_\_\_\_\_ Date \_\_\_\_\_



## Shocker Track Club Youth/Open Pole Vault Uniform Order Form 2016 – 2017 Indoor Season

ITEM	IMAGE	SIZE	COST	EXT COST
Athlete Team T-Shirt <b>Long-sleeve</b>	 Example ONLY!	Select One for Each Youth Registered Youth Sizes S M L XL S M L XL S M L XL  Adult Sizes S M L XL XXL S M L XL XXL S M L XL XXL	\$0.00 (Cost included with registration)	\$0.00
Athlete Competition Jersey  (Athlete must provide own shorts in solid black!)	 Example ONLY!	Select One for Each Youth Registered Youth Sizes S M L XL S M L XL S M L XL  Adult Sizes S M L XL XXL S M L XL XXL S M L XL XXL	Purchase One for Each Youth if desired  \$18.00	
Parent T-Shirt	 Example ONLY!	S M L XL XXL	\$18.00	
<b>Total Order</b> <b>Make SEPARATE Check Payable to Shocker Track Club</b> <b>Sales Tax Is Included!</b>				

ATHLETE NAME 1 \_\_\_\_\_ ATHLETE NAME 2 \_\_\_\_\_

ATHLETE NAME 3 \_\_\_\_\_ ATHLETE NAME 4 \_\_\_\_\_

PARENT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ EMAIL \_\_\_\_\_