



UREC Academy

Personal Training Registration Form

www.urec.appstate.edu

(828) 262-2100



Program Information:

Who/Why? University Recreation (UREC) at Appalachian State University is offering a Personal Training program for youth ages 7-17 who want to improve their basketball, soccer, or volleyball skills. This is a one-on-one training program that will give participants an opportunity to focus on areas of the game that they want to improve. UREC Academy is made possible by University Recreation, a Division of Student Development. This program allows Appalachian State University students the opportunity to develop their coaching and leadership skills.

Where? On the campus of Appalachian State University at the Student Recreation Center (main gym) located at 150 Bodenheimer Drive, Boone, NC 28608, or at the Quinn Recreation Center (main gym) located at 303 Stadium Drive, Boone, NC 28608.

Participant's Name:

Date of Birth:

Preferred Name:

Gender:

Age:

Grade:

School Attending:

Home Address:

City/State/Zip Code:

Parent/Guardian Name:

E-mail Address:

Daytime Phone Number :

Evening Phone Number :

Cell Phone Number :

Skill Level:

Sport:

What are your goals/focus for training?

Beginner

Basketball

Intermediate

Soccer

Advanced

Volleyball

Beginner: 0-2 years of playing experience

Intermediate: 2-5 years of playing experience

Advanced: 5+ years of playing experience

Training Availability:

Preferred days are Saturdays and Sundays, TBD with your leader.

Payment Information: CASH or CHECK. Full payment is expected at the time of registration. UREC highly recommends you register at the Student Recreation Center between the hours of 8:00AM and 5:00PM M-F. You may register by mailing your registration form and the full payment to: **UREC Academy, ASU Box 32081, Boone, NC 28608**

Sessions: All sessions must be completed during the Academic Semester (Fall by November 30th, Spring by April 30th, Summer by July 30th). Sessions do not carry over to a new semester.

Dependent of ASU Student:	Dependent of ASU Faculty/Staff:	Community Rate:
\$36-3 Sessions	\$45-3 Sessions	\$54-3 Sessions
\$50-5 Sessions	\$65-5 Sessions	\$80-5 Sessions
\$92-8 Sessions	\$116-8 Sessions	\$140-8 Sessions
\$136-12 Sessions	\$172-12 Sessions	\$208-12 Sessions

Does your child have any medical concerns?:

Yes

No

If yes, please explain:

Required Emergency Contact:

If parent/guardian cannot be reached, please list a contact to be called in case of an emergency:

Name:

Relationship:

Phone Number:

By signing below, I acknowledge I have read, filled out all information, and understand everything stated in this document as well as others verbally and transcriptly communicated by Appalachian State University and University Recreation. I acknowledge and agree to give permission for my child to participate in the UREC Academy. I believe that my child is physically able to engage in the UREC Academy.

Printed Name of Parent/Guardian:

Date:

Parent/Guardian Signature: _____