Cross Country Camp August 5-August 9, 2024
(For students entering 6th – 12th grade)

Cross Country camp will run Monday through Friday from ***6:00p.m. -7:15p.m.*** Student- athletes will be weight lifting, learning stretching exercises, learning about nutrition, and good running form, along with completing appropriate running workouts.

The North Linn Cross Country program has been to State 37 times for girls and 4 times for boys. We've had four individual State XC Champions. We would like to keep the program going strong.

The most important attributes we want to instill in our student-athletes are to be kind, caring, and generous people. We emphasize leadership, teamwork, honesty, and many other basic values. Running can be a healthy, life-long endeavor.

The camp is free, unless you would like to order a Cross Country t-shirt. Information on t-shirts and cross country apparel will be provided on the first day of camp.

Please return the slip below on the first day of camp, all students entering grades 6-12 must sign the slip below.

If you have any questions at all please contact: Coach Schmidt (319) 361-1029 or Coach Mudd (319) 310-6132 with questions. You may also email questions or concerns to dschmidt@northlinncsd.org.

CROSS COUNTRY Reminders

1. No athlete can participate in Cross Country Camp without a signed camp form. THIS MUST BE SIGNED BY BOTH STUDENT-ATHLETES AND PARENTS THE FIRST DAY THE ATHLETE ATTENDS.

2. Every athlete must bring a water bottle. Restrooms will be available in the lobby and out by the baseball & softball fields.

3. Athletes will need to leave promptly after cross country camp is over. Please be here by 7:15 pm to pick up student-athletes.

Parents: We hereby request that you acknowledge the enrollment of _____ in the North Linn Cross Country camp for the year 2024 and hereby release the North Linn Cross Country camp and its employees from all claims arising from any injuries which may be sustained by your son or daughter while attending camp.

Name of student-athlete: _____ Grade Fall 2024 _____

Student Signature: _____

Parent Signature: _____ Date: _____

Parent Contact Information: Phone: _____

Email: _____