

Virginia Sport & Spine Institute 2011 Enterprise Dr. Forest, VA 24551 434-851-0091 www.vassi.org

## **Training Rates and Registration**

# of Athletes	Tier 1 Coach	Tier 2 Coach	Group Training
Private Training	\$75-100/session	\$55/session	\$100 per month/ 1 day a week
2 Athlete Training	\$55 each athlete	\$45/per athlete	\$180 per month/ 2 day a week
3 Athlete Training Group	\$45 each athlete	\$35/per athlete	\$240 per month/ 3 day a week
Small Group 4-7 Athletes	\$35 each athlete	\$25 per athlete	\$300 per month/ 4 day a week
Team Training	Call for details		
Custom Camps and Clinics: call/email to discuss availability			

<sup>\*</sup>After 15-minutes of tardiness, we reserve the right to cancel a session. You will be charged unless you have given a 24-hour notice.

Athlete Name	e	Parents			
Address		City	State	Zip	
Grade	DOB	School			
Cell Phone		Sport			
Parent e-mai		Athlete e-mail			

## **Release of Liability**

l,	am in good health and able to participate in a
vigorous training program	. I have no previous sickness, illness, disease or bodily
injury that is contraindicat	ted to participation in any activity set forth. We
understand that Virginia S	port & Spine Institute (VSSI) is not responsible for any
physical injury that may o	ccur during training activities. I hereby, release, hold
harmless, discharge, and a	agree not to take any legal action against VSSI and/or its
directors, facilities, and/or	r coaches for all liability from participation in this
program.	

I also give VSSI permission to use still footage photography and/or video from our session for teaching and/or marketing.

In the event a participant is injured I give my permission for any medical procedures that may be deemed necessary.

Participant Signature	Printed Name
Parent/Guardian Signature (if needed):	
Medical Insurance:	Policy Number:
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