



Impact Throwing Academy
Summer Clinic Registration Form

Sunday, July 21st 10:00 am to 3:15pm
Hammerman Field, 485 Crane Ave, Aurora IL 60502

Athlete's Name: _____

Athlete's Age: _____ Athlete's School: _____

Parent's Names: _____

Contact Number: _____

Email Address: _____

Fees

(Includes open throwing session)

Payment is due by July 13, 2024

One Session: \$50

Two Sessions: \$70

Three Sessions: \$80

Sessions Available

(Check all that apply)

Discus: _____

Shot Put (Glide Technique): _____

Shot Put (Rotational Technique): _____

Total for sessions: _____

Mail this completed form & payment to:

Impact Throwing Academy

619 W Pleasant St

Villa Park IL 60181