

# POLE VAULT FACTORY CLUB APPLICATION Fall 2022

DATE \_\_\_\_\_ USATF # \_\_\_\_\_ B-day \_\_\_\_\_

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

ADDRESS \_\_\_\_\_

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

SCHOOL \_\_\_\_\_ GRADE \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PHONE # TO TEXT TO \_\_\_\_\_

HEIGHT \_\_\_\_\_ WEIGHT \_\_\_\_\_ AGE \_\_\_\_\_ MALE / FEMALE

SIZE AND LENGTH POLE YOU USE \_\_\_\_\_

HIGHEST COMPETITIVE HEIGHT \_\_\_\_\_

GOAL FOR THIS YEAR \_\_\_\_\_ T-Shirt Size \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_

MOTHER'S NAME \_\_\_\_\_

I agree to follow the safety guidelines of the club and coaches and I understand that I will be removed from the club if I choose not to follow those safety guidelines.

VAULTER'S SIGNATURE \_\_\_\_\_

ONE PRACTICE/ WEEK	\$190
TWO PRACTICES/ WEEK	\$380
THREE PRACTICES/ WEEK	\$490
SINGLE PRACTICE	\$20

_____ TUES	6:30-8:30
_____ WED	6:30-8:30
_____ SUN	12:30-2:30
_____ SUN	2:30-4:30

make check payable to  
Alan Roark or Pole Vault Factory  
Write "vault club" in memo line  
Mail to:  
Alan Roark  
29 Asbury Lane  
Elyria, Oh 44035

