The Athletic Training Workshop will be held in Westerville at the Nationwide Children's Sports Medicine and Orthopedic Center and Otterbein University. Participants will also have the option of becoming certified in CPR. (CPR certification requires that students stay until 4 p.m. on June 6.)

Workshop topics include:

- Introduction to the field of athletic training
- Enhancing knowledge of common athletic injuries and management
- Functional rehab activities
- Hands-on taping labs with lecture sessions





Athletic Training Workshop June 5-7, 2013

Sports Medicine
584 County Line Road W. | Westerville, OH 43082
(614) 355-6000
NationwideChildrens.org/Sports-Medicine





Learn from the experts at Nationwide Children's Hospital Sports Medicine.

The Athletic Training Workshop is designed for high school students interested in learning about athletic training from the student athlete experts at Nationwide Children's Hospital. No experience is necessary.

Date and Time:

June 5 - 6: 8:30 a.m. to 1:00 p.m. June 7: 8:30 a.m. to 4 p.m. (lunch provided)

Cost:

\$85 (additional \$5 if taking CPR class)

Workshop Includes:

Supplies, t-shirt, group photo, reference notebook and certificate of attendance

Camp Staff:

Certified Athletic Trainers from Nationwide Children's Sports Medicine

Return Application to:

Nationwide Children's Sports Medicine 584 County Line Road W., Westerville, OH 43082

Attn: Lori Siegel, ATC Phone: (614) 355-6037 Fax: (614) 355-6072

E-mail: Lori.Siegel@NationwideChildrens.org

Make Check Payable to:

Nationwide Children's Sports Medicine

Pre-registration Required by:

May 20, 2013 (postmark date)

Athletic Training Workshop Application

Name		M	F
Address			
City	State	2	Zip
Phone		A	Age
E-mail			
School	Year in School		
Years as a Student Aide:			
Have you attended this wo	rkshop before Yes _		
T-shirt Size: S M I	XL >	XXL_	_
Do you plan to take the Cl	PR class? Yes	N	Го



Liability Statement

For, and in consideration of, the opportunity to participate in the Nationwide Children's Sports Medicine/Workshop, I/we, the undersigned, discharge and covenant to hold harmless Nationwide Children's Hospital, Inc., Nationwide Children's Hospital Sports Medicine, and Otterbein College, their employees, agents, affiliates and assigns from any and all actions, causes of actions, claims, demands, costs, loss of service, expenses and compensation on account of, or in any way growing out of, any and all personal injury or property damage, which may occur as a result of participation in the aforementioned program.

Parent Signature:	 	
Date:	 	

Emergency Contact

I authorize necessary emergency medical treatment and admission to any hospital designated by the Nationwide Children's Sports Medicine staff, or their designate.

Name:
Relationship:
Home Phone:
Cell Phone:
Work Phone: