



**Life of an ATHLETE  
Summer Session  
June 19-21, 2009  
Training Application**

PLEASE PRINT ALL INFORMATION REQUESTED EXCEPT SIGNATURE

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Last First Middle

School District/Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
# Street City State Zip

Phone:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell:(\_\_\_\_) \_\_\_\_ - \_\_\_\_ Fax :(\_\_\_\_) \_\_\_\_ - \_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact : Name: \_\_\_\_\_ Phone:(\_\_\_\_) \_\_\_\_ - \_\_\_\_  
Last First

Arrival Date: **6/18** or **6/19** (please circle one) Roommate Request: \_\_\_\_\_

Is this a New or Repeat Activity? **NEW - REPEAT** (please circle one)

Are you presently a Chemical Health Professional? **YES - NO** (please circle one)

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Fees:**

Arrival Date: June 18, 2009 **\$400** (in order to accommodate travel plans you may arrive on the 18th of June)

Arrival Date: June 19, 2009 **\$350**

Checks Made Payable to: **American Athletic Institute**

\*Please mail completed application with payment to the address below

\*Your Fee includes Room and Board at the USOTC and admission to Life of an Athlete Training

\*Travel and Ground Transportation will **NOT** be provided

**\*If you have any questions or concerns please contact John Underwood at the information below.**