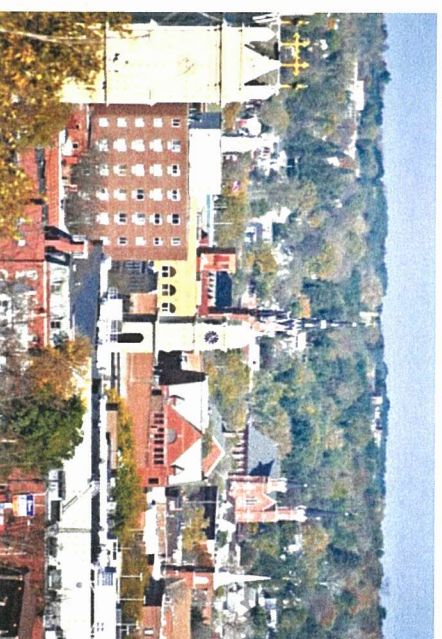




Dubuque  
Physical  
Therapy

## The Tri-State Running Series Couch to Competition



A series of running clinics designed to:

- Introduce running topics and technique
- Instruct on running gait mechanics to improve efficiency and avoid injury

**Recommended age is 12 and up.**

**Days and times can vary based on needs of participants.**

### Course Development by Jason Meyer and Ben Fern

#### Jason Meyer

Jason is a Licensed Physical Therapist and Owner of Dubuque Physical Therapy. He was the Assistant Men's Track coach at Hempstead High School 1998-2006. He is an avid runner with organized running in track and cross country for the University of Northern Iowa 1990-1995

#### Ben Fern

Ben is a Licensed Physical Therapist who joined the staff at Dubuque Physical Therapy in 2011. He ran track and cross country at Hempstead High School before attending the University of Iowa. He has since run numerous marathons, half marathons, and shorter distance races. He has extensive experience helping athletes and non-athletes alike with overuse injuries and other musculoskeletal injuries.

#### Other Instructors

##### Jeremy Jordan

Jeremy is a 2008 graduate of Clarke University with a degree Bachelor of Science degree in athletic training and in 2011 with a Doctor of Physical Therapy degree. Jeremy was an intern at Dubuque Physical Therapy during his time at Clarke and has been working in the clinic since graduating from Clarke. He is currently in his fourth year as an assistant coach for both the men's and women's track and field programs. Over the past 4 years Jeremy has coached multiple collegiate national qualifiers in both the field events and relay events.

#### Dubuque Physical Therapy

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E-mail: [Jason@dubuquapt.com](mailto:Jason@dubuquapt.com)

#### Registration Information

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Sex M / F \_\_\_\_\_  
Learning to Run \_\_\_\_\_ Class Selection \_\_\_\_\_

Address \_\_\_\_\_  
Please Circle Training to Run \_\_\_\_\_

Contact Information in case of bad weather: \_\_\_\_\_

Home phone \_\_\_\_\_ E-mail \_\_\_\_\_  
Training to Perform \_\_\_\_\_

#### WAIVER:

In consideration of the foregoing, I, for myself, my heirs, my executors, administrators, and assignees, do hereby waive and release any and all rights and claims for damages I have against Dubuque Physical Therapy or its staff for all claims of damages, demands, actions whatsoever in any manner arising or growing out of my participation in The Tri-State Running Series. I attest and verify that I am physically fit and my physical condition has been verified by a licensed medical doctor.

Signature \_\_\_\_\_

Parent Signature \_\_\_\_\_

(Required if under 18 years of age)

Date \_\_\_\_\_