



Independent Strength & Conditioning Summer 2018

8:00 a.m.—10:30 a.m. Monday-Thursday
Incoming 6th – 12th Grade Cost: \$150 (whole summer)

Mission: The goal of our summer strength and conditioning program is to improve athletic performance, decrease the likelihood of injuries, and increase mental and physical preparedness. Providing a safe, positive, yet challenging training environment, we will continue to build the culture of Independent Athletics.

Program: The Independent Summer Strength & Conditioning Program is an athletic performance based program, designed for middle and upper school students. Participants will train four days a week for a total of 8 weeks. Athletes will be broken into groups based upon their age, training experience and abilities. With a developmentally appropriate, individualized program, the athletes will utilize, with appropriate instruction, barbell lifts, Olympic lifts, bodyweight movements, and various functional strength and conditioning methods. Our goal is stronger, quicker and faster athletes with greater work capacities. Our daily workouts will begin with complete group warm-ups, followed by a rotation of weights, plyometric drill, and speed and conditioning drill work.

Important Dates:

Monday, June 4 to Thursday, June 28—Open

Monday, July 2 to Thursday, July 5—Closed for Midsummer break

Monday, July 9 to Thursday, July 26—Open

Monday, July 30 to Thursday, August 2—Closed for KSHSAA Coaching School

Monday, August 6 to Thursday, August 9—Final Week

Staff: Lead by Eric Swenson, the staff of the program will be made up of Independent head and assistant coaches from all sports.

Facility: Training will be conducted in the Independent High School weight room, Upper School gymnasium, Panther Field and track.

Registration Information

Student Name: _____ Parent Name(s): _____

Best Phone: _____ Address: _____

Graduation Year: _____

Emergency Contact Name & Phone (if different): _____

Parent Release and Indemnity: WE/I hereby agree to release, indemnify and hold harmless The Independent School, its agents, employees and representatives from all claims resulting from injury sustained by my child while participating in this program. WE/I further hereby give permission to the coaches, staff or other medical professionals to provide medical care as deemed necessary to my child, in case of injury or illness.

Parent/Guardian Signature: _____

Student Signature: _____

*Checks can be dropped off at the MS and US offices. Please make them out to The Independent School with Summer Weights in the memo. Please contact eric.swenson@theindependentschool.com with questions.