



ONETEAM



ONETITAN

2018 SUMMER STRENGTH & CONDITIONING PROGRAM

SUMMER 2018 PROGRAM

Open to all rising 9-12 THS Students
(Not e - Football Players will have their own sessions)

June 19 - August 2, 2018

Tuesdays & Thursdays

8:15-9:30am

**2-3 Additional home workouts
provided per week**



REGISTER AT:

WWW.TITANSPORTSCAMPS.COM

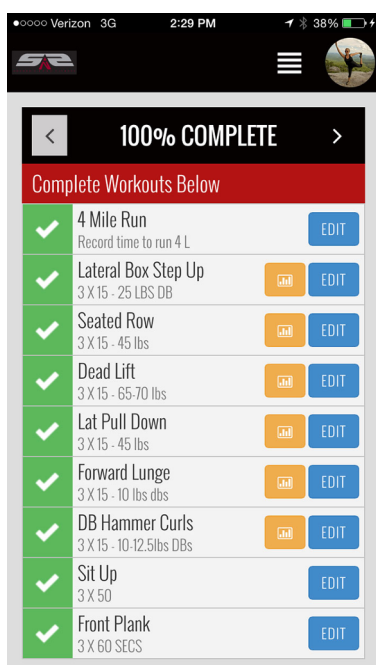
- \$20 fee covers program access for the entire summer

Upon Registration

- Athletes will receive an easy-join code to set up account at teambuildr.com
- Athletes will be provided a link to a google form to enter summer availability to allow staff for proper planning.

Contact Mr. Wolcott, Athletic Director
mark.wolcott@fcps.org
with questions

TITANS STRENGTH TRAINING PROGRAM OVERVIEW



- Workouts distributed and completed using mobile devices
- Workouts available wherever and whenever needed
- Workouts customized for each individual
- Progressive overload applied for safety and optimal growth
- 2 Days per week completed in the THS Weight Room
- 2-3 days of additional home workouts provided
- Weekly programs adapted for those on vacation
- Fitness, nutrition, and additional workouts provided for student education and development
- Team Messaging allows for communication and motivation
- Coaches can track athlete attendance and progress
- Follow us - [@THSTitans_ST](https://twitter.com/THSTitans_ST)



PROTECT THIS HOUSE.
I WILL.



2018-19 STRENGTH & CONDITIONING PROGRAM

Student Name				
Gender	Male	Female		
Grade (Fall 2018)	9	10	11	12
Student E-Mail Address				
Fall Sport				
Winter Sport				
Spring Sport				

Program Fee: \$20 fee covers program access for the entire summer

On-Line Registration and Payment Available at: www.titansportscamps.com

Cash or Check made payable to THS Athletic Boosters - Weight Room

Registration, Waiver Form, and Fee must be submitted for any athlete to participate in the program

Participant Name: _____ **Home Phone:** (____) _____ **Day Phone:** (____) _____

Emergency Contact: _____ **Phone:** (____) _____

Medical Insurance Co: _____ **Policy #:** _____

Family Physician: _____ **Physician Phone #:** _____

Recognizing the possibility of physical injury associated with the annual Tuscarora High School Strength & Fitness program, I hereby release, discharge, and /or otherwise indemnify Tuscarora High School, its administration, coaching staff, affiliates, and associated personnel, against any claim made by or on behalf of the participant listed above as a result of this persons participation in this program. I certify that the participant listed above is in sound physical condition and capable of participating in strength training & fitness activities, and that there are no medical conditions that would prevent her participation or be affected or influenced by the above named player's participation in strength training and fitness activities conducted by the Tuscarora High School coaching staff. In case of emergency, I authorize treatment to be given by my family physician or the nearest hospital's emergency departments. The participating Tuscarora coaching staff members have my permission to act on my behalf in accordance with their best judgment in any emergency requiring medical attention.

Parent / Guardian Signature: _____ **Date:** _____