



Athletic Performance Training

ELEVATE's athletic performance training program offers a complete training experience that incorporates the latest research for training athletes and is developed by one of the top minds in the strength and conditioning industry for sport performance, **Mike Boyle Strength and Conditioning** (MBSC Thrive). Athletes are closely supervised as a certified strength coach takes them through a 75 minute workout that builds and challenges a solid athletic foundation. Program includes:

SPEED – Acceleration & Deceleration, Linear & Lateral Movement Techniques, Running Mechanics

EXPLOSIVE POWER - Olympic Lifting, Plyometrics, Medicine Ball, Jumping & Landing Techniques

STRENGTH – Multi-Planar, Thorough Instruction, Focus on Upper Body, Lower Body & Core

CONDITIONING - Game Ready Preparation for all Athletes.

FLEXIBILITY - Myofascial Release (Foam Rolling), Various Forms of Stretching, Muscle Activation

INJURY REDUCTION – Movement Correction, Improve Muscular Imbalances, Balance & Stabilization

Registration details on back.

Text: (406)381-2421 email: elevatetrainingMT@gmail.com web: elevatefitnesstraining.net

ELEVATE
FITNESS & PERFORMANCE TRAINING



Sean Van Horssen, CSCS, BS Kinesiology

TJ Ward, Certified MBSC Thrive Coach

Marla Brackman, CPT, BS Exercise Science

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High School Athlete's Summer Program

Elevate Fitness and Performance Training 204 W Main St Hamilton, MT

(406)381-2421 elevatetrainingMT@gmail.com www.elevatefitnessstraining.net

Summer Session: June 5th – August 9th

Time and Days:

Strength, Power, and Conditioning: Mon, Wed, Fri 3:45pm-5:00pm

Speed Skills, Agility and Technique: Thurs 8am (outside)

(38 Training Sessions)

Full Session Special: \$325

Training packages

30 sessions: \$300

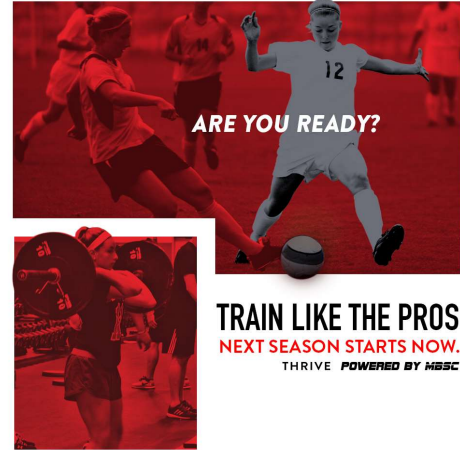
25 sessions: \$250

20 sessions: \$220

Please make checks to Elevate Fitness & Performance Training.

Drop payment off at Elevate or mail to Marla Brackman 233 Antigone Dr. Hamilton, MT 59480

Or, register and pay online at www.elevatefitnessstraining.net



Athlete's Name: _____ Year in School _____ Gender: M F

Parent's Name: _____ Phone: _____ Email: _____

AGREEMENT AND RELEASE OF LIABILITY: In consideration of being allowed to participate in the activities and programs of Elevate: Fitness and Performance Training ("Elevate") and/or in the use of its facilities and equipment, I do hereby waive, release and forever discharge Elevate and its directors, officers, agents, employees, contractors, representatives, successors and assignees, and all others from any and all responsibilities or liability for any injuries or damages resulting from or arising out of my participation in any Elevate activities, programs or use of Elevate equipment or machinery. I understand and I am aware that strength, flexibility, and aerobic exercise including the use of equipment is a potentially hazardous activity. I also understand that fitness activities involve a risk of injury and even death and that I am voluntarily participating in these activities and using equipment with knowledge of the risks involved. I hereby expressly assume and accept any and all risks of injury or death in connection with my participation in any Elevate activities, programs or use of Elevate equipment or machinery. I do further declare myself to be physically sound and suffering from no condition, impairment, disease, infirmity or other illness that would prevent my participation in any of the activities and programs provided through Elevate or in the use of its equipment and machinery. I do hereby acknowledge that I have been informed of the need or desirability for a physician's approval for my participation in an exercise/fitness activity or in the use of exercise equipment. I also acknowledge that it has been recommended that I have a yearly or more frequent physical examination and consultation with my physician as to physical activities, exercise and as to the use of exercise equipment use. I acknowledge that I have either had a physical examination and have been given my physician's permission to participate, or that I have decided to participate in activity and/or use of equipment without the approval of my physician and do hereby assume all responsibility for my participation in activities, utilization of equipment and machinery in my activities and personal training.

•Elevate: Fitness and Performance Training employees or representatives in no way intend to diagnose, treat, cure, or prevent any disease through any services or programs provided by Elevate: Fitness and Performance Training.

•Clients are required to observe any and all rules of the gym, facility, and/or where workouts are to take place.

Parent/Guardian Signature _____ Date _____