



# Pearsall Maverick

## Summer Strength, Speed, Agility and Conditioning Program

**In partnership with the ACE Program**

WHO: Incoming 7<sup>th</sup> Grade – 12<sup>th</sup> Grade

WHAT: Weight Training and Agility/Speed/Conditioning

WHERE: Pearsall High School Weight Room

WHEN: Monday – Thursday

8:00 AM – 9:30 AM and Open Weight Room 5:00 PM – 6:30 PM

Week 1: June 10 – 13

Week 2: June 17 - 20

Week 3: June 24 – 27

**Off Week: July 1 – 4**

Week 4: July 8 and July 11 **Only (July 9 and 10 – UIL Period of no activity)**

Week 5: July 15 – 18

Week 6: July 24-25 **Only (July 23 and 23 – UIL Period of no activity)**

COST: **FREE** (Snacks provided by the ACE Program)

Incoming 7<sup>th</sup>-12<sup>th</sup> graders are encouraged to participate in our 6 week strength, speed, agility, and conditioning program. This camp will be run by our Pearsall ISD coaching staff. All athletes will participate in a 6 week weight program developing explosiveness, power, and strength through the use of Olympic lifts, plyometrics, and the “Maverick Strength Program.” Our athletes will also participate in sessions of speed, agility, and conditioning sessions that will focus on increasing speed, quickness, and change of direction while teaching proper running technique. This is an excellent opportunity for our athletes to stay in shape over the summer and allow them to be acclimatized for their fall sport as the school year begins.

Athletes Name (Print): \_\_\_\_\_

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

Parents Name (Print): \_\_\_\_\_

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

In consideration of my child's voluntary participation in the Pearsall Independent School District Athletic Department's Summer Camp Program, which includes use of its facilities and/or equipment, and in addition to the payment of any fee associated with this participation, I do hereby agree to waive, release and forever discharge the Pearsall Independent School District, its trustees, employees, agents, and representatives from any and all responsibility or liability, under state and/or federal law, for any injuries and/or damages resulting from my child's participation in the Summer Camp Program. This participation includes any organized or individual activity that is part of the Summer Camp Program, including but no limited to preparation sessions, workouts, and meetings. I hereby acknowledge and understand that this waiver of liability extends to claims by me, my child, and/or any other parent or legal guardian of my child. My signature below certifies that I understand and accept the conditions and waiver as explained above.

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

Date \_\_\_\_\_

Emergency Contact Name and Number \_\_\_\_\_