

2019 Youth Athletic Development for Grades 4-8

The after-school training program is for 4th-8th graders who would like to get stronger, get fit for sports, and work on general fitness. We will introduce strength, cardiovascular, and flexibility exercises in a game or obstacle course format to make it fun! **Christine Neff** of Elevate Conditioning is a Health Educator and an IYCA certified Youth Fitness Specialist and Nutrition Specialist. The IYCA believes that developmentally-sound, fun and goal-oriented exposure to fitness and sport is a necessary building block in progressing through the formative years into adulthood.

Dates: 4 classes; Thursdays, starting February 7, ending Thursday, February 28

Time: 3:40 - 4:40pm

Location: Gym

Bring: gym shoes; water bottle; snack

Cost: \$30 for 4 sessions. Checks should be made out to **Elevate Conditioning**

Reserve your spot in the program by emailing Christine Neff at tineneff@gmail.com.

Please return this permission slip and payment to the school office.

Youth Athletic Development Permission Form

I, _____, understand that participation in and the movements involved with the Youth Athletic Development program (including Circuit Training, Cross Country Running Club, Strength Training for Adolescents, Kidventure Fitness, and Adventure Running Club) carries with it a risk of injury. Therefore, I hereby waive and release Elevate Conditioning, LLC of any and all liability for any injuries or illness incurred while involved in activities associated with the YAD Program. Elevate Conditioning will not be held liable for any medical expenses incurred while my child _____, is at the class. I, hereby, authorize Christine Neff to act for me in any emergency requiring medical attention. In lieu of a medical certificate signed by a medical physician, I have no knowledge of any physical or mental impairment that would be affected by my child's participation in the program. I agree that my child will be picked up by 4:40 p.m. by a parent or have written permission to be picked up by someone other than his or her parent. I will verbally indicate to the instructor the child(ren) I am picking up.

Parent/Guardian Signature

Date

Number I can be reached in case of
Emergency during class hours

Email address