



**DETROIT THRIVE Sports Performance Training For Teens-**: Our Eight Week Intense Athletic Development Program for teens offers an innovative approach to training used by College & Pro Athletes to give them the edge.

The program includes instruction in movement training, injury reduction and rehabilitation, linear and lateral speed techniques, foot speed and agility, explosive power development, proper functional strength training and energy system conditioning. The program is locally run exclusively at Detroit Thrive Training Systems, located inside the Eastside Hockey Ice Arena.

Our exclusive program designed by the world renown Mike Boyle, Strength and Conditioning Coach for Boston University, the NHL's Boston Bruins, the USA Women's Olympic Silver Medalist Ice Hockey team, and the 2013 World Series Baseball Champion Boston Red Sox.

## WE TRAIN FUTURE ATHLETES FOR SUCCESS

Each 60 minute workout consists of:

- Functionally Sound Movement Training:
- Strength Training;
- Conditioning;
- Strong Technique Focus.

Programs are progressed when technique has been mastered and all athletes are led by our trained Detroit Thrive Coaches.

SPEED - Acceleration, Deceleration, Linear and Lateral Movement Techniques, Running Mechanics, Footwork

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

STRENGTH - Functional Approach, 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 - Identify & Correct Muscular Imbalances, Balance & Stabilization









# SPORTS PERFORMANCE June 17 - August 9

Participant's Name:						
First Name	LastName					
D.O.B:/		Participants E-mail:				
Home Address:		_City:		State:	Zip code:	
Sport Training for:						
Club Name:						
Position Played:	_ Email:					
		Phone:				
Guardian Name:		_Guardian E-n	nail:			
First Name	Last Name					
Guardian Phone:						
Emergency Contact Name:	Emergency Contact Phone:					
Check the session you wish to enrol Ages 10 and up, MWV or T/TH, *Meml *NO SESSIONS JULY 3rd & 4th		ildren's program	ns			
2 Days Per week	2 Days Per week					
Monday/Wednesday □ 10:00-11:00am	Tuesday/Thursday  ☐ 10:00-11:00	/				
□ 12:00-1:30pm	□ 12:00-1:00					
□ 3:45-4:45pm <b>\$299</b>	□ 3:45-4:45 <b>\$299</b>					
Payment Method (please check)  Cash at dub	☐ Check at club		□Credit		□ Parent Members Account	
Card No   _ _  _			_	_   Card	Expiry/ 3DigitCode	
By signing below, I acknowledge an	d accept the terms & o	conditions belo	W.			
	//					
Guardian Signature	Date					

#### **Terms & Conditions**

Enrollment is valid for the class time allocated only. Participants must abide by the club rules and direction of the Thrive Coach at all times. Failure to comply with the Thrive Coach directions will result in non-refundable cancellation. During training, photographs & video may be taken and used in a variety of future publications, brochures, posters and on internet sites for promotional purposes. You are granting a non-exclusive license to reproduce this material as determined by Detroit Thrive without further permission and for which no entitlement or remuneration will be paid and that all rights in the photographs are waived. The photographs will not be used in a manner deemed to be adverse or defamatory to the Participant. Exercise by its nature may result in injury from time to time. Detroit Thrive & MBSC Thrive take no responsibility for any injuries incurred.

## **Guest Waiver Form**

This form is an important legal document. It explains the risks you are assuming by using DETROIT THRIVE. It is critical that you read and understand it completely. After you have done so, please print your name legibly and sign in the spaces provided at the bottom.

### **Waiver and Covenant Not to Sue**

I,include, but may not be limited to, weight consideration of DETROIT THRIVE, I do hear their respective agents, heirs, ass of action or causes of action, present or full including any injuries resulting there from	and/or resistance here and forever re signs, contractors, uture, arising out o	training, and sports tr lease and discharge ar and employees from a	aining and activ Id hereby hold h ny and all claims	ities. In narmless <i>DETROIT</i> s, demand, rights
	Assumpt	ion of Risk		
I,	s inherent in exerc nges during sport t	cise for some individual craining and activities d	s. I acknowledg loes exist. These	e that the e changes include
I understand that as a result of my partici disorder that could result in my becoming employment or having a normal social life	partially or totally	_		
I recognize that an examination by a physactivities. If I,this exercise program with <i>DETROIT THR</i> .	, have chosen n	ot to obtain a physicia	n's permission p	
In any event, I acknowledge and agree th results I will achieve from this program. I		-		me regarding the
NAME	DATE	PHONE		
ADDRESS	CITY	STATE	ZIP	
Participant's Signature		Date		
Parent/Guardian Signature		Date		