## **CAMP STAFF**

Bartram Trail Coaches.

Athletes will receive instruction from USA weightlifting certified coaches.

Safety will be stressed at all times.



Savannah Parker 2018 State Medalist



**2018 District Champions** 

Bartram Trail High School 7399 Longleaf Pine Parkway St Johns, Florida 32259

Phone: (904)547-8340 Fax: (904)547-8359 Email: Ronald.Reagan@stjohns.k12.fl.us



# SUMMER CAMP

When: June 4th - July 26th, 2018

Mon, Tues, Wed, & Thursday

10AM - 12PM

Where:

**BTHS WEIGHTROOM** 

Who:

Rising 9th - 12th Graders

## **Daily Schedule**

- CNS Activation—warm up
- Bar mobility
- GPP [General Physical Preparation]
- Olympic Lifts [Snatch / Clean&Jerk]
- Auxiliary progressions
- Cool down Stretches



# <u>Location</u>

#### **Bartram Trail Weightroom**

### <u>SCHEDULE</u>

TRAINING SESSIONS

MONDAY TO THURSDAY

10:00 AM- 12:00 NOON

# What to Bring

Campers should wear workout clothes (T-shirt, shorts, athletic and lifting shoes)

## **Physicals/Permission**

Every participant must have a current athletic Physical , Parent Permission form, and Heat/Concussion form on file w/ BT Athletics.

#### **Registration Form**

1	Name:		
I	Parent/Guardian Name(s)	):	
	Address:		
			zip code
(Detach along line and return with payment)	Grade fall '18:	Date of Birth:_	/
	CAMP COST: \$100 for the entire summer The camp fee may be paid by cash, check, or online. Please make checks payable to Bartram Trail High School. *** All participants must have a current physical *** Method of Payment Check (#)		
	Cash Cash		
	<b>Disclaimer:</b> I as a parent/guardian, hereby give permission for my child to participate in Strength Camp. I acknowledge the fact that she is physically able to participate in camp activities. I authorize the directors of the camp to act for me according to their best judgment in any emergency requiring medical attention. I acknowledge that I will be responsible for any cost (through fami medical insurance or otherwise) due to sickness or injury to my daughter. hereby waive any claim I might have against the Strength Camp and the institution providing the facilities.		
	Parent/Guardian Signatu	ire / Da	/