



**KLEIN OAK**  
ATHLETIC DEPARTMENT

**Teams up with  
Doerre,  
Hildebrandt,  
Krimmel & Ulrich  
Intermediate**

**SUMMER 2011  
ADVANCED  
STRENGTH &  
CONDITIONING**

Weekly Sessions Include:

- Speed Development
- Strength Development
- Ply metrics/Bounding
- Joint Stabilization
- Flexibility Exercises
- Strength Endurance
- Cardiovascular Endurance
- Agility Running
- Abdominal Circuit
- Olympic Lifts
- Sports Specific Lifts

**State of the Art  
4,000 Square Foot  
Weight Room**

- Summer Strength &  
Conditioning Calendar
- Week 1—June 13th—16th
  - Week 2—June 20th—23th
  - Week 3—June 27th—30th
  - Week 4—July 11th—14th
  - Week 5—July 18th—21st
  - Week 6—July 25th—28th

**For More Information Call:**

**KLEIN OAK HIGH  
SCHOOL  
Athletic Office:**

**832-484-4801**



**Date: June 13th—July 28th  
Monday—Thursday**

**Session I Time: 7:30 AM—9:30 AM  
7th, 8th & 9th Graders**

**Session II Time: 9:30 AM—11:30 AM  
10th, 11th & 12th Graders**

**Choose One Session**

**FEE: \$125.00  
Strength & Conditioning  
Klein Oak Weight Room**

**Participants: Boys & Girls Grades 7th—12th,  
As of September 2011**

**Student Name: \_\_\_\_\_**

**Grade in Sept. 2011: \_\_\_\_\_**

**All blanks MUST be filled out. Please print in Black Ink Only.**

**KISD—KLEIN OAK STRENGTH & CONDITIONING CAMP  
JUNE 13TH THRU JULY 28TH (MONDAY—THURSDAY)**

**AMT. \$ 125.00  
IF APPLICABLE CHECK # \_\_\_\_\_**

**NAME: \_\_\_\_\_ PH#: \_\_\_\_\_ WT: \_\_\_\_\_ AGE: \_\_\_\_\_**

**HOME ADDRESS: \_\_\_\_\_**

**PRESENT SCHOOL: \_\_\_\_\_ SCHOOL SEPT. 2011: \_\_\_\_\_ GRADE SEPT. 2011: \_\_\_\_\_**

**(CIRCLE ONE)**

**SESSION I: 7:30—9:30 AM 7TH, 8TH & 9TH GRADE      SESSION II: 9:30—11:30 AM 10TH, 11TH & 12TH GRADE**

**T-SHIRT SIZE:      S      M      L      XL**

**MAKE CHECKS PAYABLE TO KLEIN I.S.D. Camp Fee: \$125 Must accompany application**

**MAIL COMPLETED APPLICATIONS TO:      KLEIN OAK/ATHLETIC DEPT.  
Or return to Klein Oak Athletic Office      22603 Northcrest Dr., Spring, TX 77389**

**KISD WAIVER**

I, the undersigned, being the individual, spouse, or legally authorized and qualified guardian of \_\_\_\_\_ agree to hold Klein Independent School District, it's Board of Trustees, administration, and/or faculty, harmless from all liability for any injuries which my son/daughter may receive while participating in any recreational activities or utilizing the Klein School District facilities. I herewith authorize the athletic director, coach, and/or district employee to secure medical services for any family member if necessary, and I agree to pay, either directly or through my own personal health and accident insurance policy, all medical costs.

\_\_\_\_\_ Date      \_\_\_\_\_ Signature of parent or legal guardian

\_\_\_\_\_ Street Address of parent/legal guardian      \_\_\_\_\_ City/State      \_\_\_\_\_ Zip      \_\_\_\_\_ Phone

**REQUIRED EMERGENCY INFORMATION**

**Name of Parent or Guardian: \_\_\_\_\_**

**Father's place of employment: \_\_\_\_\_ Phone: \_\_\_\_\_**

**Mother's place of employment: \_\_\_\_\_ Phone: \_\_\_\_\_**

**Family Physician: \_\_\_\_\_ Office #: \_\_\_\_\_**

**Address: \_\_\_\_\_ Emergency #: \_\_\_\_\_**

**List the name of a neighbor or relative who can be contacted if parent or guardian cannot be reached.**

**Name: \_\_\_\_\_ Phone: \_\_\_\_\_**

**Insurance policy with: \_\_\_\_\_ Policy #: \_\_\_\_\_**

***INCOMPLETE APPLICATIONS WILL BE RETURNED***