



Lutheran High School

## 2019 Summer Strength & Speed Camp June 3 – August 1

### Daily Schedule

\*Every Monday through Thursday morning beginning June 3 (OFF July 1-4)

\*Monday/Thursday sessions run 90 minutes. Tuesday/Wednesday sessions run 60 minutes.

- 10<sup>th</sup>-12<sup>th</sup> Grade Girls and Boys Basketball: 7:00am
- Football Only: 8:00am
- Girls: 9:00am
- Boys: 10:00am

### Cost

\$125 (checks made out to Lutheran Athletics, turned in to front office or Coach Murphy)

\*Submit payment along with form below.

### Coaches

**Jordan Murphy:** An alum of Lutheran High School, Coach Murphy is entering his fourth year as the Head Strength and Conditioning Coach at Lutheran High School. Also a former NCAA D-1 football player at the University of Colorado, Coach Murphy has continued his training and education in the field of sports performance by earning his Certified Strength and Conditioning Specialist certification from the National Strength and Conditioning Association and his Master's Degree in Sports Performance from the University of Denver.

**Elite Speed:** We are proud to partner with Elite Speed for our summer speed program. Their experienced and proven staff will implement a detailed performance schedule to meet our team goal objectives, as well as the individual goals of each athlete. Elite Speed will be on campus every Monday and Thursday.

Please contact Coach Murphy with any questions: [jordan.murphy@lhsparker.org](mailto:jordan.murphy@lhsparker.org)

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(Submit this portion along with payment)

**Student-Athlete Name:**

**Parent Name(s):**

**Parent Phone:**

### Parent Release & Indemnity Agreement

We/I hereby agree to release, indemnify, and hold harmless Lutheran High School, its employees, representatives or assigns, including the Lutheran High School Athletic Department, the coaching and training staff, from all claims resulting from injuries sustained by my child while participating in the Summer Strength & Speed Camp. We/I further hereby give permission to the coaches, training staff or other medical professionals to provide medical care as deemed necessary to my child in case of injury or illness.

**Parent Signature:**

**Date:**