



# TOMPKINS FALCONS STRENGTH AND CONDITIONING 2015 CAMP

**Dates :** June 8 - July 23 Tompkins High School

**\*\* NO workout June 29 – July 2 \*\***

***Camp will be conducted Monday thru Thursday***

**Cost: \$100.00**

*(NO REFUNDS)*

**Make checks payable to KISD**

*You may also register and pay for the strength and conditioning camp using your student's MyPaymentsPlus account. Information about MYPaymentsPlus can be found on the parent resources tab at [www.katyisd.org](http://www.katyisd.org).*

**Who can come:** All WCJH and SLJH athletes zoned to Tompkins High School  
All OTHS athletes (girls & boys)

**Supervised by the Coaching Staff**

**You must have an approved KISD physical packet on file to participate**

## **Falcon Camp 2015 Philosophies**

- Develop Mental Toughness    •Build an **ATHLETE!**    •Rest is **ESSENTIAL!**
- Develop strength, power, flexibility, and muscular endurance
- Demand consistency and **INTENSITY!**
- TECHNIQUE** is most important aspect of strength and conditioning

Name \_\_\_\_\_ Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_, TX Zip Code \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_

Work# \_\_\_\_\_ Cell # \_\_\_\_\_

Sport(s): \_\_\_\_\_ Grade \_\_\_\_\_ As of 8/1/2015

Current Junior High \_\_\_\_\_ (for incoming 7th and 8th graders)

Are you zoned to go to school at Tompkins High School? Please circle **yes** or **no**.

Tee Shirt Size                      S                      M                      L                      XL                      XXL  
Choose 1

Session 1	_____	7:30 AM-9:30 AM	Incoming 7th and 8th graders
Session 2	_____	10:00 AM-12:00PM	
Session 3	_____	4:30 PM-6:30PM	(No workouts on week 1)

**\*PLEASE COMPLETE THE FRONT AND BACK OF THIS FORM\***

## **Attention Falcon Athletes!**

We would like to invite you to join the Tompkins Coaching Staff for the 2015 Strength and Conditioning Camp!

All WCJH, SLJH zoned to Tompkins, incoming Tompkins freshmen and upperclassmen are welcome to attend. We are excited to have the opportunity to work with you as you prepare for athletics at Tompkins High School.

Our camp will give you the chance to develop your speed and agility, and also increase your strength and mental toughness. This camp is a great asset for you before the 2015 school year begins.

**Please direct questions to:**

**Tompkins Athletic Coordinator:**

**Coach Tademy**

**281. 234.1000**

**anthonydtademy@katyisd.org**

Please mail camp registration

As soon as possible to:

**Tompkins S & C Camp**

**4400 Falcon Landing Blvd.**

**Katy, TX 77494**



***warm ups (including abs work),  
conditioning,  
speed,  
agility,  
plyos,  
circuit training,  
and weights***

I \_\_\_\_\_ agree to indemnify and hold harmless Katy Independent School District, any employee, administrator and/or board member from actions or lack of action regarding any accident, injury, or illness, damage to your property or any other medical condition resulting in my participation in the following activity:

I understand if I am a member or a parent/guardian of a member of the \_\_\_\_\_ the District Insurance does not cover any injuries sustained while participating in this event. Any and all medical claims must be filed with the participant's "private insurance carrier" if available.

I agree to indemnify and hold Katy Independent School District its trustees officers, employees or agents harmless from any and all claims against Katy Independent School District its trustees, officers, employees or agents made by third parties which result from the above-named person's actions while participating in this event.

Furthermore, I hereby expressly release and agree to hold harmless on my behalf and on behalf of the above named person, the Katy Independent School District, its trustees, officers, employees or agents from all claims or actions of whatsoever nature, in tort or in contract, that I or the above named person ever had, now has or may have in the future against the Katy Independent School District its trustees, officers, employees or agents which result from the above named person's participation in this event.

In consideration of the above-named person being permitted to participate in this program, I expressly waive all claims to which I may otherwise be entitled, including but not limited to, claims for medical expenses and wages.

I recognize that the Katy Independent School District, its trustees, officers, employees or agents have sovereign immunity and governmental immunity under Texas Law. I understand that the Katy Independent School District, its trustees, officers, employees or agents are not waiving any sovereign or governmental immunity that it or they have under Texas or other applicable law.

I, the undersigned, have read this release and understand all its terms. I have executed it voluntarily and with full knowledge of its significance.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Printed Name of Student

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Printed Name of Parent/Guardian:

\_\_\_\_\_  
Address:

\_\_\_\_\_  
City, State and Zip Code:

\_\_\_\_\_  
Phone Number: