Todd Devers Sports Performance Camp

Thursday, December 28th and Friday, December 29th 5th-8th Grades 9am-11am 9th-12th Grades 1pm-3pm

Location: Cheyenne Wells School New Gym

EDUCATION

University of Northern Colorado, Greeley, Colorado Bachelor of Arts: Kinesiology Emphasis: Fitness and Exercise Minor: Biological Sciences

CERTIFICATIONS

*Certified Strength and Conditioning Specialist/National Strength and Conditioning Association

*Certified Strength Coach/International Sports Sciences Association

*APEX Certified Fitness Professional

*Certified in CPR/First Aid/AED

BIC

I began my career in strength and conditioning working with the Colorado Xplosion in 1998 (professional women's basketball). I then moved on to Fast-Twitch Sport Performance Center in Dallas, Texas where I was the Head of Strength and Conditioning. I soon took on the role as Marketing Director and finally was awarded the title of Director of Business Development. After 6 years with the company I was hired on by the Dallas Cowboys as an Assistant Strength and Conditioning Coach. While I worked with the Cowboys I was also the Head Strength and Conditioning Coach for the Dallas Desperados of the Arena Football League. After 5 years with the organization I moved on to the University of Connecticut where I was the Strength and Conditioning Coach for football, men's and women's tennis, and men's golf.

I have been blessed to work with a number of talented athletes over my career ranging from junior high on up to professional. I have worked with just about every sport throughout. Along with those listed above, I have also had the privilege of training volleyball, soccer, hockey, figure skating, baseball, softball, and believe it or not, rodeo athletes.

PHILOSOPHY

Each sport requires a specific focus. There are basic fundamentals that overlap each sport. However, within each sport there are sport specific drills/lifts/techniques that are required for the athlete. This is where my knowledge and experience are applied. I look to increase strength, speed, and power. I also look to improve first step quickness and lateral movement. Flexibility and core strength are stressed in my programs. Finally, my goal is to have each team I work with better conditioned than the opponent. While all of this is very important, none of it will be accomplished without proper food intake, adequate hydration, and rest. My goal is to educate and teach each athlete to maximize their full potential. With 100% focus and effort all of those listed can and will be improved!

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Camper	Name				~~~~~~	~~~
First:		Last:		Gender: Male Female_	Grade:	
Parent/C	Guardian - Contact	<u>Information</u>				
First:		Last:	0	Contact phone #:		
E-mail:						
Camp Fe	e - \$30/Camper (Inc	ludes T-Shirt): Make C	hecks Payable to M	arcy Brossman		
T-Shirt Siz	<u>:e</u> :					
Youth S	Youth M Youth L	Youth XL Adult XS	_ Adult S Adult M _	Adult L Adult XI	Adult 2XL	

Registration Deadline Monday, December 18th
Turn payment and forms in at the school front office.

WAIVER AND RELEASE OF LIABILITY

In consideration of the risk of injury while participating in the Todd Devers Sports Performance Camp (the "Activity"), and as consideration for the right to participate in the Activity, I hereby, for myself, my heirs, executors, administrators, assigns, or personal representatives, knowingly and voluntarily enter into this waiver and release of liability and hereby waive any and all rights, claims or causes of action of any kind whatsoever arising out of my participation in the Activity, and do hereby release and forever discharge Todd Devers, located at 1212 Raintree Drive #D094, Fort Collins, Colorado 80526, his affiliates, managers, members, agents, attorneys, staff, volunteers, heirs, representatives, predecessors, successors and assigns, for any physical or psychological injury, including but not limited to illness, paralysis, death, damages, economical or emotional loss, that I may suffer as a direct result of my participation in the aforementioned Activity, including traveling to and from an event related to this Activity.

I AM VOLUNTARILY PARTICIPATING IN THE AFOREMENTIONED ACTIVITY AND I AM PARTICIPATING IN THE ACTIVITY ENTIRELY AT MY OWN RISK. I AM AWARE OF THE RISKS ASSOCIATED WITH TRAVELING TO AND FROM AS WELL AS PARTICIPATING IN THIS ACTIVITY, WHICH MAY INCLUDE, BUT ARE NOT LIMITED TO, PHYSICAL OR PSYCHOLOGICAL INJURY, PAIN, SUFFERING, ILLNESS, DISFIGUREMENT, TEMPORARY OR PERMANENT DISABILITY (INCLUDING PARALYSIS), ECONOMIC OR EMOTIONAL LOSS, AND DEATH. I UNDERSTAND THAT THESE INJURIES OR OUTCOMES MAY ARISE FROM MY OWN OR OTHERS' NEGLIGENCE, CONDITIONS RELATED TO TRAVEL, OR THE CONDITION OF THE ACTIVITY LOCATION(S). NONETHELESS, I ASSUME ALL RELATED RISKS, BOTH KNOWN OR UNKNOWN TO ME, OF MY PARTICIPATION IN THIS ACTIVITY, INCLUDING TRAVEL TO, FROM AND DURING THIS ACTIVITY.

I agree to indemnify and hold harmless Todd Devers against any and all claims, suits or actions of any kind whatsoever for liability, damages, compensation or otherwise brought by me or anyone on my behalf, including attorney's fees and any related costs, if litigation arises pursuant to any claims made by me or by anyone else acting on my behalf. If Todd Devers incurs any of these types of expenses, I agree to reimburse Todd Devers.

I acknowledge that Todd Devers, his volunteers, representatives and agents are not responsible for errors, omissions, acts or failures to act of any party or entity conducting a specific event or activity on behalf of Todd Devers.

I ACKNOWLEDGE THAT THIS ACTIVITY MAY INVOLVE A TEST OF A PERSON'S PHYSICAL AND MENTAL LIMITS AND MAY CARRY WITH IT THE POTENTIAL FOR DEATH, SERIOUS INJURY AND PROPERTY DAMAGE. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, lack of hydration, condition of participants, equipment, vehicular traffic and actions of others, including but not limited to, participants, volunteers, spectators, coaches, event officials and event monitors, and/or producers of the event.

I ACKNOWLEDGE THAT I HAVE CAREFULLY READ THIS "WAIVER AND RELEASE" AND FULLY UNDERSTAND THAT IT IS A RELEASE OF LIABILITY. I EXPRESSLY AGREE TO RELEASE AND DISCHARGE TODD DEVERS AND ALL OF HIS AFFILIATES, MANAGERS, MEMBERS, AGENTS, ATTORNEYS, STAFF, VOLUNTEERS, HEIRS, REPRESENTATIVES, PREDECESSORS, SUCCESSORS AND ASSIGNS, FROM ANY AND ALL CLAIMS OR CAUSES OF ACTION AND I AGREE TO VOLUNTARILY GIVE UP OR WAIVE ANY RIGHT THAT I OTHERWISE HAVE TO BRING A LEGAL ACTION AGAINST TODD DEVERS FOR PERSONAL INJURY OR PROPERTY DAMAGE. To the extent that statute or case law does not prohibit releases for negligence, this release is also for negligence on the part of Todd Devers and camp volunteers.

In the event that I should require medical care or treatment, I agree to be financially responsible for any costs incurred as a result of such treatment. I am aware and understand that I should carry my own health insurance.

In the event that any damage to equipment or facilities occurs as a result of my or my family's willful actions, neglect or recklessness, I acknowledge and agree to be held liable for any and all costs associated with any actions of neglect or recklessness.

between two parties of equal bargaining agree that this Agreement is clear and unalter or explain the terms of this Agree purposes for which it is entered into. In the event that any provision contained any term, condition, phrase or portion of the condition o	g strength. Both the Participant,	n, and is to be interpreted as an agreement, and Todd Devers of other evidence will be used or admitted to sed on the language in accordance with the language in accordance with the language in accordance with the language or invalid, or if to be unlawful or otherwise unenforceable, go as the clause severed does not affect the
intent of the parties. If a court should fi	nd that any provision of this agreemen	t to be invalid or unenforceable, but that by provision shall be deemed to be written,
In the event of an emergency, please con	ntact the following person(s) in the order	er presented:
Emergency Contact	Contact Relationship	Contact Telephone
	ENT / GUARDIAN WAIVER FOR I	MINORS then this release must be signed by a parent
I hereby certify that I am the parent or without reservation to the foregoing on	guardian ofbehalf of this individual.	, and do hereby give my consent
Participant's Name:		
Parent / Guardian Name:		 -
Relationship to Minor:		
Phone:		
Signature:		
Date:	=	