



Dry Land Training Program

We will once again offer our advanced skaters an off ice training opportunity to work on athletic attributes important for on ice skill development. Off ice training can also reduce the risk and severity of injury.

Key areas of focus will be agility, power, strength, balance, and flexibility. Each workout will include: warm-up, dynamic and static stretching, upper body, core and lower body strengthening, and cool down. A variety of techniques or topics may be incorporated, such as resistance bands, plyometrics, yoga, specific skating jump technique and body positions.

We are excited that FFSC alumni, Kayla Shea, will be sharing her talents in dry land this season. Kayla has a passion for working with athletes. She has a degree in Athletic Training and Masters in Human Performance of Kinesiology. She has experience as a personal trainer and is currently a wellness coach at Profile by Sanford.

Participants will need tennis shoes, an exercise mat, and water bottle.

Please call Leigh Gervais (218-731-6760), Jessica Daniels (218-205-7369), or Kayla Shea (218) 770-2236 with any questions.

Dates/Time: Thursday January 3rd- Monday March 4th

Mondays: 5-6 pm

(9 weeks)

Thursdays: 5-6 pm

(9 weeks)

Location:

Community Room

Costs:

We highly encourage skaters to participate in both days to see optimal results

Mondays and Thursdays: \$90

Mondays only: \$54

Thursdays only: \$54



Dry Land Training Registration and Waiver Form

Name _____ Phone number _____

Email _____

I am registering for:

_____ Monday and Thursdays (\$90)

_____ Mondays only (\$54)

_____ Thursdays only (\$54)

Please return registration sheet/signed waiver and registration fees* by **December 28th** to:

Leigh Gervais
23222 Rus Dic Circle
Fergus Falls, MN 56537

*Checks payable to Leigh Gervais

I/We the participant and the parent(s) or guardian agree to hold harmless Leigh Gervais and Jessica Daniels from any and all liability or damages arising directly out of or in connection with enrollment and or participation in the above mentioned Dry Land Training Program. In the event of an injury to _____, I hereby consent and authorize the administration and all treatments of tests that may be considered advisable or necessary by the emergency room, physician or any other clinic physicians. I understand as a condition of enrollment, I am responsible for providing medical insurance coverage for any medical expenses incurred. I hereby acknowledge the health of my boy/girl to be ready for off ice training. I agree to abide by all the rules imposed by the instructors and the US Figure Skating rules.

Signature of parent or legal guardian

_____ Date _____

Emergency contact name/phone number _____

Insurance Co. _____ Policy # _____

*We reserve the right to cancel the program due to low enrollment