



Off-Ice Training Program

Overview

LSA is pleased to introduce a new, more comprehensive, off ice training program. LSA has developed this program under the direction of Kristen Veltkamp who is a Certified Pilates Instructor, physical therapist and owner of a national firm that educates instructors in pilates.

The Fall LSA Off-Ice Training Program will have four components, all interrelated and described below. Off-Ice Training is necessary to improve strength and mobility and to help prevent injury.*

Functional Assessment: Athletes are encouraged to take part in a one-on-one analysis which will evaluate strength and movement and will identify specific areas of weakness. Kristen and her team of trainers will perform this assessment exam. A training program to specifically address these limitations will be designed for each skater, and this program will be outlined in an individualized training card for each skater. Each training card will outline 20 – 30 minute circuit workouts that the skater may perform individually. Functional Assessments tentatively are scheduled to be performed on a bi-annual basis with the second assessment tentatively scheduled for May.

Supervised Open Gym: Exercise stations will be set up in the upstairs workout area and LSA approved trainers will supervise this area various times throughout the week. Skaters who undergo the Functional Assessment and who have current training cards may “drop in” during open gym times to perform their pre-designed circuits. Training cards will be dated and will be good for a period of one year. No more than 10 athletes will be allowed in the upstairs training area at any given time. The trainer on sight will move athletes through the circuit so those waiting will get a turn.

Core/Balance Group Classes: Group classes will be offered to enhance mobility and strength. These classes will involve pilates, yoga, kettleball and sport specific balance exercises.

Off Ice Jump Classes: This group class will address plyometric training. Areas such as jump height, rotation, and in-air and landing positions will be addressed. This class, coordinated as part of the overall off ice training program, will be taught by skating instructors.

* Although LSA will adopt a general periodization plan, LSA's athletes all have unique schedules for competitions and tests. Therefore, skaters should seek the guidance of their individual coaches for information regarding specific periodization programs.

Cost and Enrollment

The cost for the initial Functional Assessment, including materials and training cards, as well as unlimited open gym visits is \$150 per skater for the Fall 2006 contract season. Skaters may enroll by completing and mailing the bottom of this form prior to September 2, 2006. The winter contract and spring contract seasons are expected to include a reduced fee for open gym time only, as the second assessment dates are scheduled tentatively for May. Group Classes are outlined in the Fall contract (revised) and cost \$5 per class when contracting.

Schedule*

The fall schedule for assessments, open gym times and group classes are as outlined below:

Functional Assessments: Wednesday, September 6, 2006 6:00 – 8:00 p.m.
 Saturday, September 9, 2006 8:00 – 11:00 a.m.

Supervised Open Gym: Monday, 6:00 – 7:30 p.m.
 Tuesday, 6:45-7:15 p.m.
 Wednesday, 6:30–8:00 a.m.
 Thursday, 7:15–8:15 p.m.
 Friday 5:00–6:00 p.m.
 Saturday 8:00-8:45 a.m.
 (all open gym times start the week of September 18)

Core/Balance Group Class: Tuesday, 6:15 – 6:45 p.m.
 Wednesday, 6:35 – 6:55 p.m.
 Saturday, 8:45-9:15 a.m.

Off-Ice Jump Class: Monday, 6:30 – 7:00 p.m. (intermediate/low)
 Thursday, 6:45-7:15 p.m. (high)
 Saturday, 9:15-9:45 a.m. (high/intermediate/low)

* LSA reserves the right to adjust classes and times when necessary.

Enrollment Form

Registration form and payment are due September 2, 2006. Checks should be made to LSA.
Mail to: Rebecca Hatch-Purnell, 2211 Homewood Dr., Louisville, KY 40223

Skater's Name _____ D.O.B. _____
Home Phone _____ Email Address _____
Coach _____ Emergency Contact: _____

Assessment Day (please circle, time will be assigned): Wed. or Sat.

Waiver

I am aware that ice skating poses danger and risks of injury. In consideration for the Applicant's participation in the activities of Louisville Skating Academy and LSA Basic Skills Group ("LSA"), I hereby releases LSA and their officers, directors, members, contractors, and employees ("Released Parties") from all claims, demands, losses and damages, and from any liability resulting from any injury incurred while participating in any LSA activities and programs whether or not caused by the negligence or other fault of the Released Parties. In the event that the Applicant is incapacitated while participating in these activities or programs, I hereby give LSA permission to seek necessary medical assistance for the Applicant.

Signature of Participant or Legal Guardian

Date