

## CAMP REGISTRATION - PART I

Name: \_\_\_\_\_

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

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip: \_\_\_\_\_

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

Primary Email: \_\_\_\_\_

Grade (Entering Fall '09): \_\_\_\_\_

Age (As of June 9, 2009): \_\_\_\_\_

School: \_\_\_\_\_

T-Shirt Size (Men's): \_\_\_\_\_

### **COST:**

All Campers will receive a T-Shirt & 8 Week Training Program

**One Session - \$165      Both Sessions - \$290**

**\*\*\*\*Group Rate - \$125 per Session\*\*\*\***

*(4 or more campers registered and attending together)*



**SESSION I**  
JUNE 9, 10, 11  
4:30 - 6:30 pm



**SESSION II**  
JUNE 16, 17, 18  
4:30-6:30 pm



**SESSIONS I & II**

Make Checks Payable to:

**Record Breakers Inc.**

*We do not accept Credit Cards at this time*

Send Completed Registration and Check to:

Lon Record  
Basketball Strength & Conditioning Coach  
Davis Center  
Villanova University  
Villanova, PA 19085

## Camp Director



### **LON RECORD**

**Basketball Strength &  
Conditioning Coach**

**VILLANOVA UNIVERSITY**

Coach Record is in his second year as the Strength & Conditioning Coach for Men's & Women's Basketball at **Villanova University**. As the S&C coach, Coach designs and implements year-round training programs which include strength training, conditioning, speed training, flexibility, agilities, as well as day-to-day nutritional education.

Coach Record came to Villanova from the **Baltimore Ravens** where he was an assistant S&C Coach. Prior to Baltimore, Coach Record was the Head Football Strength & Conditioning Coach at **Florida International University (FIU)** in Miami, FL. He was responsible for all facets of the S&C of a Division I football program.

Before his time in Miami, Coach Record spent six years at the **University of Notre Dame** as an Assistant Strength & Conditioning Coach. His primary responsibility was as the Football Assistant, while training a number of other teams including Men's Lacrosse, Men's Soccer and the Track Throwers. While at Notre Dame, Coach Record was the Director of the Notre Dame Strength & Conditioning Camp for 3 years. The camp was widely accepted as one of the best of its kind, attracting over 300 campers per year.

Coach Record received his Masters in Exercise Science from **Austin Peay State University (TN)** while serving as the Head S&C Coach for 13 teams. Coach Record began his career as an intern S&C coach at **Penn State University** and received his undergraduate degree from **Lock Haven University (PA)**.

# RECORD BREAKERS

## SPORTS PERFORMANCE CAMP



**AT  
VILLANOVA UNIVERSITY**



**STRENGTH**



**FLEXIBILITY**



**ACCELERATION**



**AGILITY**

- **Male and Female Athletes**
- **All Sports**
- **Entering Grades 9-12**
- **Villanova Stadium & Varsity Weight Room**

**SESSION I: June 9, 10, 11**

**SESSION II: June 16, 17, 18**

**On the Campus of Villanova**

## CAMP INFORMATION

Record Breakers Sports Performance Camp is designed to provide a Division I training experience to male and female high school athletes. Athletes of all sports entering grades 9 through 12 grade are eligible to participate. Each training session will involve all aspects of a summer training program used by collegiate athletes. This camp is ideal for those preparing for preseason or looking to get the edge to compete at the next level. Proper training technique will be taught and conducted by a camp staff made up of collegiate strength & conditioning coaches. Camp will incorporate the following techniques and training methods:

- ⇒ **Dynamic Warm-Up**
- ⇒ **Static and Dynamic Flexibility**
- ⇒ **Acceleration Training**
- ⇒ **Agility and Change of Direction**
- ⇒ **Plyometrics**
- ⇒ **Strength Training**

## DAILY CAMP SCHEDULE

- 4:15 pm Begin Check In  
4:30 pm Meet as a Group  
4:35 pm Group Dynamic Warm Up  
4:45 pm Rotation 1
- Station 1 - Dynamic Flexibility
  - Station 2 - Running Technique
  - Station 3 - Plyometric Training
- 5:30 pm Break - Guest speaker  
5:40 pm Rotation 2
- Station 1 - Agility Training
  - Station 2 - Upper Body Strength Training
  - Station 3 - Lower Body Strength Training
- 6:20 pm Group Static Flexibility

## CONTACT INFORMATION



Lon Record  
(610) 519-3063  
lon.record@villanova.edu

## CAMP REGISTRATION - PART 2

### RELEASE OF LIABILITY

In consideration of the Attendee being allowed to participate in any way in the RECORD BREAKERS INC SPORTS PERFORMANCE CAMP AT VILLANOVA program, its related events and activities, I acknowledge, appreciate and agree that the risk of injury from the activities involved in the program are significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist. In regard to the attendee, I knowingly and freely assume all such risks, both known and unknown, even if arising from the negligence of the Record Breakers Inc, Villanova University, or others, and assume full responsibility for my participation. I willingly agree to comply with the stated and customary terms and conditions of participation. If however, the I and/or the Attendee observe any unusual significant hazard during my presence or participation, I and/or the Attendee will remove myself from participation and bring such to the attention of the Record Breakers Inc immediately. I and the Attendee and on behalf of my heirs, assigns, personal representatives and next of kin, hereby release, Indemnify, and hold harmless Record Breakers Inc, Villanova University, their officers, officials, agents and/or employees, other participants, with respect to any and all injury, Disability, Death, or loss or damage to person or property, whether arising from the negligence of Record Breakers Inc, Villanova University or otherwise, to the fullest extent of the law.

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

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### REFUND POLICY

Refunds minus a \$25 cancellation fee will be issued up until 3 days prior to the start of camp. Refund requests must be made in writing. No refund will be issued after the start of camp.

### CAMPER HEALTH RECORD

Parent/Guardian: \_\_\_\_\_

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

Email: \_\_\_\_\_

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

Emergency Contact Phone: \_\_\_\_\_

Policy Holder Name: \_\_\_\_\_

Provider: \_\_\_\_\_

Policy Number: \_\_\_\_\_

Primary Care Physician: \_\_\_\_\_

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

Date of Last Tetanus Immunization: \_\_\_\_\_

Date of Last Physical: \_\_\_\_\_

Please list any current medications, allergies, surgeries, physical restrictions, or chronic/recurring illness.:

\_\_\_\_\_  
\_\_\_\_\_

### PARENT AUTHORIZATION & CONSENT TO TREATMENT

The above stated information is accurate to the best of my knowledge. The camper stated above has my permission to participate in camp activities and to be treated by the camp medical staff in case of injury or when medication needs to be administered. Furthermore as the parent/legal guardian for this child, I attest that the participant has had a physical within the last twelve months and that the physical disclosed no medical conditions, other than those listed above, that would make his participation in this sports camp a risk. I authorize Record Breakers Inc training staff to release medical information for the above participant to the parents and physicians in case of emergency. In the event that the camper requires Further medical attention, I hereby give my consent for the camper to be treated for injuries, illnesses, and/or other medical conditions at the local hospital.

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

Signature: \_\_\_\_\_ Date: \_\_\_\_\_