



Unlevel the playing field.

**HOME OF THE ACCELERATION PROGRAM**

## **TST ACADEMY & ATHLETIC REPUBLIC SOCCER TRAINING PROGRAM 2010**

**SATURDAY, JANUARY 9—SATURDAY, FEBRUARY 27**  
**2:00pm-3:30pm (1<sup>st</sup> Group) 3:30pm-5:00pm (2<sup>nd</sup> Group if necessary)**

For the second straight year, TST Academy and Athletic Republic (formerly Acceleration) are teaming up to offer a soccer speed, agility, strength and conditioning program at Athletic Republic. The soccer speed and agility program at Athletic Republic will focus on helping the soccer athlete in a number of capacities including: enhancing players' optimal speed by increasing the two components of speed: stride length and stride frequency; improve running form and mechanics; improve explosive power; improve agility (with emphasis on multi-directional skills); improve flexibility; increase core stability and balance; improve conditioning and strength. We will also through the aforementioned areas of training work on the prevention of injury especially the ACL.

### **Number of Training Sessions**

The program will consist of eight ninety minute speed, agility and strength sessions at Athletic Republic

### **Training Schedule**

The training will begin on Saturday, January 9<sup>th</sup> at 2pm. Training will be every Saturday from January 9<sup>th</sup> to February 27<sup>th</sup>. We will work to fill the first group from 2pm to 3:30pm. We will allow 20 student-athletes to register for the first group and then will open a second session from 3:30pm to 5pm if necessary. A confirmation email will be sent to you once the registration is received.

### **Program Pricing**

The eight session program is \$129.39 (tax included). Payment is due prior to the start of the training on January 9<sup>th</sup>.

### **The Acceleration Soccer Speed Program helps the soccer athlete:**

- increase maximum sprint speed
- improve sprinting mechanics
- prevent injury especially the ACL
- improve coordination & awareness
- increase core stability & balance
- improve quickness
- improve power
- increase anaerobic endurance
- increase aerobic base for long-distance running
- enhance self-esteem

### **Contact**

Charlie McDoniel  
Cell: 314.707.4341  
Email: [charliem@nutriformance.com](mailto:charliem@nutriformance.com)  
[www.athleticrepublicstl.com](http://www.athleticrepublicstl.com)

### **Training Facility**

Athletic Republic St. Louis  
10407 Clayton Road  
Frontenac, MO 63131  
Located inside Nutriformance (in LeChateau Center)



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To register please fill out the below registration form and waiver of liability. Please mail the form with payment (either check or cc#) to Athletic Republic (address on previous page), Attn: Charlie McDoniel.

**Registration Form & Waiver of Liability**

**First Name:** \_\_\_\_\_ **Last** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City/ST** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_ **Emergency Phone #:** \_\_\_\_\_

**Club Team:** \_\_\_\_\_ **Coach:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**Payment Method:** Payment is due prior to the start of the training program. We accept cash, check and charge. We accept Visa, MasterCard, American Express and Discover. Please note which method below.

Check Enclosed \_\_\_\_\_ Check Number: \_\_\_\_\_  
Charge \_\_\_\_\_ Card Type: VISA MC AMEX DISC Card Number \_\_\_\_\_  
Exp \_\_\_\_\_ Security Code \_\_\_\_\_ Name on Card \_\_\_\_\_ Billing Zip \_\_\_\_\_

‘I authorize Athletic Republic to charge the above credit card for the full amount of \$129.39 for the soccer program.’

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

**Release and Waiver of Liability**

In consideration of being permitted to enter and use the facilities or equipment of NUTRIFORMANCE ACCELERATION, LLC (“ACCELERATION”) for any purpose, including but not limited to, use of the facilities or equipment or participation in any exercise program or in any other program offered by ACCELERATION, I hereby agree to the following:

I hereby acknowledge that use of the facilities or equipment or participation in any exercise program or in any other program offered by ACCELERATION involves risk of injury to me, my guest or my spouse, whether I or someone else causes it.

I hereby release, waive and discharge and covenant not to sue ACCELERATION or any officer, director, employee or agent of ACCELERATION (“Releasees”) from and for any and all liability to me, my guest, my spouse or any unborn child for any loss or damage, and any claim or demands therefore on account of any injury to the person or property or resulting in my death, whether caused by the negligence of the Releasees or otherwise, while I, my guest or my spouse is in, upon or about the premises or any facilities or equipment of ACCELERATION.

I hereby assume full responsibility for and the risk of bodily or mental injury, death, economic loss or property damage due to the negligence of Releasees while in, about or upon the premises of ACCELERATION and/or while using ACCELERATION’s premises or any facilities or equipment of ACCELERATION.

I hereby agree to indemnify, defend and save and hold harmless Releasees and each of them from any loss, liability, damage or cost they may incur due to my presence or the presence of my guests or spouse in, upon or about the premises of ACCELERATION or in any way using any facilities or equipment of ACCELERATION whether caused by the negligence of Releasees or otherwise.

I further expressly agree that this Release and Waiver is intended to be as broad and inclusive as is permitted by the law of the State of Missouri and that if any portion of this Release and Waiver is held invalid, it is agreed that the other provisions of this Release and Waiver shall, notwithstanding, continue in full legal force and effect.

I have read and voluntarily signed this Release and Waiver of Liability and further agree that no oral representations, statements or inducements apart from the foregoing written agreement have been made.

\_\_\_\_\_  
Client/Legal Guardian Signature Date