Introduction

Since 2002, Southwest General Sports Medicine has offered competitive athletes the opportunity to participate in the Athletic Development Program. This specialized program is developed and staffed by nationally certified athletic trainers and strength and conditioning specialists.

The purpose of the Athletic Development Program is to create a better athlete through long-term athlete development (LTAD) and introducing the athlete in a learning-to-train atmosphere. The Athletic Development Program will utilize the “windows of trainability,” meaning age-appropriate activities enhancing the ABCs (Agility, Balance, Coordination and speed). The foundation of motor learning and general skills will be emphasized.

The United States Olympic Committee is engaging each of its Olympic and Paralympic National Governing Bodies to endorse the American Development Model and tailor the long-term athlete development concepts to meet their unique needs. These Programs include USA Hockey, USA Basketball, US Soccer, USA Lacrosse and USA Volleyball.

Daily Schedule

9:20-9:30 a.m.  Check-in
9:30-9:50 a.m.  Flexibility
9:50-10:45 a.m.  ABCs
10:45-11 a.m.  Cool down

Due to the program’s level of activity and vigorous conditioning, each athlete must submit a current, completed physical form along with the registration form.

Attendees are encouraged to wear athletic shoes. They should also bring water, a towel and a notebook.

Schedules may change due to weather and equipment use. Southwest General Sports Medicine reserves the right to cancel this program due to low enrollment or other reasons.

Program Staff

Beau Kinnaird, MEd, AT, CSCS, has directed speed development programs in the Cleveland area for more than 20 years. Currently, he is a staff athletic trainer at Southwest General Sports Medicine and head athletic trainer, strength coach at Berea-Midpark High School. Beau is certified by the National Athletic Trainers Association, the National Strength and Conditioning Association and is a certified USA Hockey Level 3 Coach. His previous experience includes working with athletes at Lutheran Hospital, Baldwin-Wallace University, and the Chicago White Sox minor league system.

Additional Southwest General athletic trainers, physical therapists and invited guests may help with the program.

Please call 440-570-3919 for additional information about the Athletic Development Program.

*Do not contact Berea-Midpark High School or LifeWorks of Southwest General.

Tuesdays and Thursdays

June 21, 26 and 28
July 3, 10, 12 and 17
9:20 a.m. - 11 a.m.

Lou Groza Field (behind the Roehm Athletic Facility)
7220 Pleasant Ave.
Berea, OH 44017
Program Fee: $50
Enrollment Form

Student Name: __________________________ Age: __________________________
Address: _______________________________ School: _________________________
City and Zip: ____________________________ E-mail: ___________________________

Part 1 - Consent to Treat
I hereby give consent to the Southwest General Sports Medicine Athletic Development Program to transfer my child to the closest (or most appropriate) hospital in the event my child has a medical emergency.

In the event my child needs urgent care, but not emergency care, and reasonable attempts to contact me are not successful, I give the Southwest General Sports Medicine Athletic Development Program consent to transfer my child to a hospital or to contact the following medical care providers:

Physician: ___________________________ Physician phone: ______________________
Dentist: ______________________________ Dentist phone: ______________________

Part 2 - Refusal to Treat
I DO NOT give my consent for non-emergency medical treatment of my child. In the event of an injury requiring urgent medical treatment, I grant Southwest General Sports Medicine authority to take the following action:

________________________________________________________________________

________________________________________________________________________

Part 3 - Waiver
I release Southwest General Sports Medicine and staff from liability for any costs resulting from accident or injury through participation in the Athletic Development Program.

Parent/Guardian name ___________________________ Phone: __________________
Emergency Contact name: _________________________ Phone: __________________

Parent/Guardian Signature: ___________________________ Date: ________________

To enroll, forward Enrollment Form, Physical Form and fee to:
Southwest General Sports Medicine, Athletic Development Program
Attn: Beau Kinnaid, AT
7390 Old Oak Blvd.
Middleburg Heights, OH 44130
Sorry, no refunds after 6/21/18.

Registration Check List
___ Enrollment Form
___ Current Physical Form
___ Forms signed and dated
___ Checks made payable to Southwest General Sports Medicine