Each student will receive an individualized evaluation, instruction on corrective movements and individualized specialized strength improvement plan.

**F.M.S.**

**Functional Movement Screen**

The **FMS** modality evaluation checks for motor control, mobility, stabilization, movement sequencing and muscle recruitment, while identifying deficiencies. Students will receive instruction & practice on correct movement mechanics, in addition to a custom specific strength routine.

**P.R.I.**

**Breathing exercises have a multitude of benefits. The Postural Restoration Institute, theorizes that movement imbalances stem from the effect of breathing and your postural integrity. Considering how the spine, ribs and lungs are impacting the kinetic chain. Students will learn to control breathing equally to both lungs, while stabilizing through movements.**

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**Pre-Registration**

*With NC Book-keeper KWaligorski@nsd.org*

Open to North Creek Students until 3/4/20, then enrollment will open to friends and family of North Creek.

Recommended for Students ages 12 and up

**What:** Performance and Injury Prevention Workshop with Licensed Health Professionals

**When:** March 14th from 9:00am-1:30pm & April 4th from 9:00am-1:30pm

**Cost:** $75 1st Student  $65 Siblings or Parents  $50 Single Day  Checks to North Creek ASB

**Where:** North Creek High School Gym

**Why:** Improved Mobility, Motor Control and Performance.

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Inquire Further with Head Track & Field Coach:
Nicole Luckenbach:
nluckenbach@nsd.org
O:425-408-4515
The **2020 Schedule** of events is below. Attendees will need to dress in athletic attire and bring a pencil. They are welcome to bring a water and snack.

<table>
<thead>
<tr>
<th>March 14th 2020 @ North Creek High School Gymnasium, building 3.</th>
<th>April 4th 2020 @ North Creek High School Gymnasium, building 3.</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:45AM Arrive, check in and receive Individualized Plan Recording Book.</td>
<td>9:00AM Welcome and Introductions</td>
</tr>
<tr>
<td>9:00AM Welcome and Introductions</td>
<td>9:10AM Video Breakdown of Simple-Complex Movements</td>
</tr>
<tr>
<td>9:10AM Injury Prevention Presentation</td>
<td>9:30AM Restorative Breathing Institute</td>
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<tr>
<td>9:30AM FMS Demonstration</td>
<td>10:10AM <strong>Station 1: Over Head Squat</strong></td>
</tr>
<tr>
<td>9:40AM Station 1: Over Head Squat</td>
<td>10:40AM <strong>Station 2: Hurdle Step</strong></td>
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<tr>
<td>10:25AM Station 2: Hurdle Step</td>
<td>11:10AM <strong>Station 3: Inline Lunge</strong></td>
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<tr>
<td>11:20AM Station 3: Inline Lunge</td>
<td>12:20PM <strong>Station 4: Shoulder Mobility</strong></td>
</tr>
<tr>
<td>12:05PM Station 4: Shoulder Mobility</td>
<td>12:50PM <strong>Station 5: Trunk Stability Push Up</strong></td>
</tr>
<tr>
<td>12:50PM Station 5: Trunk Stability Push Up</td>
<td>1:30PM Presenters Available for Questioning</td>
</tr>
<tr>
<td>1:35PM Presenters Available for Questioning</td>
<td></td>
</tr>
</tbody>
</table>

Returning Participants will be reevaluated and receive the next corrective exercise for their improvement plan.

This clinic will reach full enrollment at 150 participants. Enrollment is open to North Creek Students ONLY until 3/4/20. Starting 3/5/20, seats are available on a 1st come basis to family and friends outside of North Creek High School. Submit payment and [signed waiver](#) to the North Creek Book-keepers office in Building 1.
NORTHSORE SCHOOL DISTRICT
CONSENT AND RELEASE OF LIABILITY

Activity __________________________________________
Purpose __________________________________________
Location __________________________________________
Date/Time __________________________________________
Advisor ____________________________ Contact Info ____________________________

Although Northshore School District attempts to ensure the safety of all involved in activities at our schools, participation in this activity may have inherent risks that may result in injury. Such injuries can range from abrasions, bruises and sprains to more severe injuries such as, but not limited to, paralysis and brain injury. Careful consideration should be given to the risks and dangers associated with athletic activities before making the decision to participate.

Northshore School District is neither responsible nor liable for accidents, injuries or medical expenses that may occur due to participation in this activity.

- Northshore School District does not provide accidental medical insurance coverage for this activity and its participants.
- In the event it becomes necessary for school district staff to obtain emergency care for a participant, 911 may be called.
- Participants and their families are responsible for all expenses incurred because of an accident, injury, illness or unforeseen circumstance that may arise due to participation in this activity.

Parent/Guardian Acknowledgement: I acknowledge that I have read and understand the above information and grant permission for my child’s participation in this event. I agree to hold and save harmless the Northshore School District, its school board, employees and assigns for any claims, suite or damages (including but not limited to defense and indemnification) which might result from my participation or my child’s participation in any fashion in the above-described event.

- My child has no known medical or physical condition which could interfere with his/her safety in this activity.
- My child has a medical or physical condition that the school should be aware of, see Health Alert attached.

Participant Name __________________________________________ Grade ____________
School Student Attends __________________________________________
Parent/Guardian Name (print) __________________________________________
In case of emergency, best phone number to reach me at ____________________________
Parent/Guardian Signature __________________________________________ Date ____________