

Sports Summer Strength and Agility Program 2026 Muscle Beach!



Get stronger, faster, and more confident this summer. Our Strength & Conditioning Camp is designed to help athletes **build strength, improve agility, and reduce the risk of injury** through proper training techniques and structured workouts. This program is **highly recommended for all incoming and current athletes** who want to prepare for the upcoming seasons and compete at their highest level. Come put in the work and build the foundation for a great year of Panther athletics.

If you have any questions please feel free to contact Coach Kudola christopher.kudola@bvsd.org or Ryan Bishop ryan.bishop@bvsd.org

Sports Summer Strength and Agility Program 2026 Muscle Beach!

When: M, T, Th June 1st - July 30 (7 weeks)

Time:

8:00am-11:00am

Where: Tennis Courts @ Recht Field

Cost: \$250 Per athlete.

What: Top of the line training. Each athlete enrolled into a program will get top of the line training that will build strength, speed, agility and injury prevention. The program will be managed by BHS coaches and shared with all Head and Assistant Coaches.

Why: It is VITAL that we as a school do whatever it takes to get to the next level. The summer program is built to build athletes to reduce injury and give each student an opportunity to compete at a high level.

Who: Any and all student athletes that are interested in taking their game to the next level.

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The BHS strength and conditioning program is offered to all Boulder high school athletes including incoming freshmen through seniors over the summer months. We offer many different programs to meet the needs of all of our student-athletes based upon ability, age and commitment level. We will use the State-of-the-art program Teambuildr that will build a program for each athlete. The goal of our strength and conditioning program is to provide student-athletes the best opportunity to improve their athletic performance over the summer months and to **decrease injuries during athletic competition**. Athletes will train safely, consistently, sensibly, and be motivated by other teammates as well as by members of the Panthers coaching staff.

Program Staff:

The summer weights program will be run by several of our head coaches and assistant coaches from other BHS programs.



M, T, Th June 1st - July 30th
8:00am-11:00am

All sessions are weekly Monday, Tuesday and Thursday.

The Boulder Strength & Conditioning programs goal is to ensure that the benefits that they gain from the program are life long. Our hope is that every athlete that passes through our program, gains the knowledge of a good and healthy lifestyle to help them become better students, athletes, and members of society. **The cost of the program will be \$250 for the entire summer for all participants. Payments accepted in person or online with RevTrack on the BHS student store under All Sports and Participation Fees.** Please make checks out to Boulder High School.

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How to Pay and Register Online:

1. Go to <https://boh.bvsd.org/>
2. Click Athletics and Activities tab at the top of the page. <https://boh.bvsd.org/athletics>
3. Click Registration and Fees on the left of the page. <https://boh.bvsd.org/athletics/registration-fees>
4. Click on the Summer Weights at the top in the middle and fill out the form and return it to Coach Kudola or the athletic office.
5. Go to RevTrac and Click All Sports. <https://bvsd.revtrak.net/high-schools/boh/boh-team-sports/boh-all-sports-and-participation-fees/#/list>
6. Click on the Summer Weights and Agility- <https://bvsd.revtrak.net/high-schools/boh/boh-team-sports/boh-all-sports-and-participation-fees/#/v/boh-boulder-high-school-summer-weights-and-agility>
7. Pay and Check out.

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Sports Summer Strength and Agility Program 2026 Muscle Beach!

Student Information:

Name: _____ Gender: (M or F)

Home phone # _____ Cell # _____

Student's D.O.B.: _____ Student's Age: _____ Shirt size _____

Student grade level 2026/27 School Year (9-12) _____

Sports participated in: Fall _____ Winter _____ Spring _____

Address: _____

City: _____ Zip: _____

Parent/Guardian (P/G) Name(s): _____ Best Contact #: _____

Payment Made: _____ Cash _____ Check # _____ RevTrack

Emergency contact name: _____ Emergency phone number _____

Emergency contact name: _____ Emergency phone number _____

Consent form along with fee must be turned in to BHS office or Coach Bishop prior to participation. Please Staple checks to consent form or put in envelope with athletes name or pay online through RevTrak on the BHS school store. THANKS! Student can not start to train without the proper paperwork.

Name of Insurance Company: _____

Group/ID#: _____

List two LOCAL people who will temporarily care for your student if you cannot be reached:

Name: _____ Phone: _____

Name: _____ Phone: _____

Family Doctor: _____ Phone: _____

Address: _____ City: _____ Family

Dentist: _____ Phone: _____ Address: _____

_____ City: _____

HEALTH INFORMATION: List any significant or ongoing health conditions relevant to school or athletics (severe allergies / epipen, asthma, A.D.D., birth defect, diabetes, epilepsy, heart disease, vision or hearing problem, medications, etc.) I hereby give my consent for medical treatment deemed necessary by physicians for any illness or injury resulting from his/her athletic participation. I understand this authorization will only be enforced when I cannot personally be contacted and provide for immediate treatment. PLEASE LIST IN THIS SPACE BELOW

PLEASE RETURN THIS TO Coach Kudola

chris.kudola@bvsd.org OR THE ATHLETIC OFFICE PRIOR

TO THE FIRST DAY OF WORKOUTS. No student can

participate without this form.

(PARENT/GUARDIAN SIGNATURE) (DATE) Off Season Activity Athletic Insurance Waiver

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christopher.kudola@bvsd.org or Ryan Bishop ryan.bishop@bvsd.org

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I understand that the Boulder Valley School District does not provide accident insurance for any student participating in summer camps or any other school activity.

PLEASE RETURN THIS TO COACH BISHOP PRIOR TO THE FIRST DAY OF WORKOUTS.

No student can participate without this form.

CHECK ONE:

_____ I have other insurance coverage.

OR

_____ I do not have insurance and I will assume responsibility for payment of expenses incurred in the event of injury to my son/daughter.

Signed: _____ Date: _____

(parent/guardian) Parent Permission Form

**** WARNING:** By its nature, participation in off season conditioning/camps/clinics includes a risk of injury, this may range in severity from minor to long-term catastrophic. Although serious injuries are not common in supervised sports activities, it is impossible to eliminate this risk. Participants can and have the responsibility to help reduce the chance of injury. Players must (1) obey all safety rules, (2) REPORT ALL PHYSICAL PROBLEMS TO THEIR COACHES, and (3) inspect their equipment daily. By signing this Permission Form, we acknowledge that we have read and understand this warning. PARENTS AND/OR STUDENTS WHO DO NOT WISH TO ACCEPT THE RISKS DESCRIBED IN THIS WARNING SHOULD NOT SIGN THIS PERMISSION FORM.

I hereby give my consent for _____ to participate off season activities including open gyms, conditioning, camp or clinics for sports including: baseball, basketball, cross country, football, golf, gymnastics, lacrosse, skiing, swimming, tennis, track and field, cheerleading, dance team, wrestling, volleyball, soccer, softball.

Signed: _____ Date: _____

(parent/guardian)

**PLEASE RETURN THIS TO COACH KUDOLA PRIOR
TO THE FIRST DAY OF WORKOUTS. No student
can participate without these form.**

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