



Dear Parents:

We want to thank you for choosing the PE @ PC East Program! We understand that virtual schooling puts more on you as parents to ensure they are progressing through their academics, so we want to help you with their physical activity! This 1 hour physical activity class will get the kids out of the house, get them moving, and get them to try new things, all while under the instruction of our certified personal trainers.

Your kids will be introduced to sports such as basketball, volleyball, pickleball, soccer, and kickball. Our personal trainers will teach the importance of hydration, how to properly stretch, proper form in weightlifting (12 and under is bodyweight only), and fun fitness games.

A few important things before the semester starts:

**1. Important registration deadlines:**

**a.** All Registration forms are processed in the order they are received. Princeton Club Members will get priority registration through August 31<sup>st</sup> and be processed first. After that, members and non-members will be processed in the order it is received. Nonmember registrations may be turned in prior to August 31<sup>st</sup> but will be put "in order" to be processed after August 31<sup>st</sup>.

**2.** All paperwork must be completed in its entirety before your child starts. This includes all information on the registration form and dates enrolled.

**3.** In an effort to prevent the spread of COVID 19:

**a.** we are reducing group gatherings, thus I will not be hosting an open house, however, I would be happy to answer any questions via email or individual meet and greet with myself or a specific trainer. Just let me know and I will try to coordinate schedules.

**b.** In addition, I will be keeping groups to 10 kids or less. We will have the entire gymnasium, so we have plenty of space to spread out.

**c.** We will have routine handwashing before and after activities, we have hand sanitizer available daily, and we will sanitize all equipment used before and after each use; also encouraging good habits for the kids to do daily.

**d.** All participants are required to wear a mask during indoor activities, unless they have a medical reason not to be wearing a mask. We will go outside as much as possible (weather permitted) to allow kids a break from wearing their masks.

**4.** All information for this PE program can be found on our website [www.princetonclub.net](http://www.princetonclub.net). This includes all schedules.

**5.** All communication also goes out via email. If you are not receiving emails, please contact us so we can resolve the issue.

**6.** On the last page is a list of what to bring everyday (this can also be found on the website).

**7.** We offer sport specific training with our certified personal trainers at additional cost. We have worked with athletes from 13 years old up to collegiate levels. Please contact Crystal about trainer's sport specialties or to get started.

Again, we are looking forward to hosting a PE program where your kids will learn about fitness, be active, and have fun! If you have any questions, feel free to contact us anytime.

Sincerely,

Crystal Lanphier, Program Director  
Princeton Club – East

# PE @ PC East Child Information

## Personal Information

Participant Name: \_\_\_\_\_ Age: \_\_\_\_\_ Female \_\_\_\_\_ Male \_\_\_\_\_

Address: \_\_\_\_\_ Parent Email: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Parent: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Parent: \_\_\_\_\_ Day Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

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

Physician/Medical Facility: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## Physical Activity and Medical Questionnaire

Circle

- |  |   |   |
|--|---|---|
| 1. Has a doctor ever said you have a heart condition and recommended only medically supervised activity?   | Y | N |
| 2. Do you have chest pain brought on by physical activity?   | Y | N |
| 3. Do you tend to lose consciousness or fall over as a result of dizziness?  | Y | N |
| 4. Has a doctor ever recommended medication for your blood pressure or heart condition?  | Y | N |
| 5. Do you have a bone or joint problem that could be aggravated by the proposed physical activity?   | Y | N |
| 6. Are you aware, through your own experiences or a doctor's advice, of any other physical reason against your exercising without medical supervision? | Y | N |

Heart Condition	y	n	Hernia	y	n
Diabetes	y	n	Recent Surgery	y	n
Asthma-uncontrolled	y	n	Sacroiliac Problem	y	n
Shortness of Breath	y	n	High Blood Pressure	y	n
Arthritis/Bursitis	y	n	Knee Problems	y	n
Rheumatism	y	n	Back Problems	y	n

**I certify that the above statements are true and correct. I understand that a Doctor's note may be requested. If a note is requested, I should not proceed with this workout until the note is received.**

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

Student 1 Name: \_\_\_\_\_

Student 2 Name: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ M or F \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_ M or F \_\_\_\_\_

Please CHECK each full week you plan to have your children attend. If you plan to use only specific days please CIRCLE the days you plan to attend.

Week 1: Sept 8 - Sept 11 T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: September 3

\*no class Labor Day

\*\*If you are looking to sign-up 3 siblings or more, please submit an extra copy of this page with The added children's registration information.

Week 2: Sept 14 – Sept 18 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: September 10

Week 3: Sept 21 – Sept 25 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: September 17

Fees:

**Member Daily**

1<sup>st</sup> child \$15

Each additional child \$10

Week 4: Sept 28 – Oct 2 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: September 24

**Non-Member Daily**

1<sup>st</sup> child \$20

Each additional child \$15

Week 5: Oct 5 – Oct 9 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: October 1

**Billing Option**

All members and non-members have the option of being billed on a monthly basis. The 1st week must be paid at time of registration. The remaining weeks will be auto-deducted from your credit card on the 16<sup>th</sup> of each month. (All weeks in September billed 9/16, all week in October billed 10/16, all weeks in November billed 11/16, all weeks in December billed 12/16).

\_\_\_ Yes I am interested in this option.  
(Must provide info below).

Week 6: Oct 12 – Oct 16 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: October 8

Week 7: Oct 19 – Oct 23 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: October 15

Week 8: Oct 26 – Oct 30 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: October 22

Credit Card Type: \_\_\_\_\_

Credit Card #: \_\_\_\_\_

Week 9: Nov 2 – Nov 6 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: October 29

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

Billing Zip Code: \_\_\_\_\_

Week 10: Nov 9 – Nov 13 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: November 5

Times offered: 8-12yr old

Mondays 4:30pm-Rachel

Tuesdays 5pm-Rachel

Wednesdays 4:30pm-Lauren

Week 11: Nov 16 – Nov 20 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: November 12

Week 12: Nov 23 – Nov 27 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: November 19

\*no class Thanksgiving Day

Week 13: Nov 30 – Dec 4 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: November 26

Week 14: Dec 7 – Dec 11 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: December 3

Week 15: Dec 14 – Dec 18 M T W R F

Subtotal: \_\_\_\_\_

Registration Deadline: December 10

# PE at PC East Waiver and Registration

**PARENT OF CHILD PARTICIPANTS MUST FILL OUT THIS FORM. ONLY ONE WAIVER AND REGISTRATION FORM NEEDED PER FAMILY. FILL OUT SEPARATE CHILD INFORMATION FORM FOR EACH CHILD ATTENDING AND ATTACH.**

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Member # (or indicate non-member)

Member Name

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Day Phone

Evening phone

Email Address

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Address

Street

City

State

Zip Code

**FITNESS:** Member or legal guardian of a Member warrants and represents that they are in good physical condition and is physically able to undertake all physical activities and to use the facilities of The Princeton Club ("Princeton Club"), and has no disability, impairment or ailment preventing Member or legal guardian of Member from active or passive exercise, or that will be detrimental to their health, safety, comfort or condition if one does so engage or participate. By execution of this Agreement, the Member assumes full risk and responsibility for any injuries or damages which may occur to Member or legal guardian of a Member in, on or about The Princeton Club's facility.

**RELEASE OF LIABILITY:** The undersigned Member or a legal guardian(s) ("Member") recognize that fitness work out, exercise, physical activity or sports participation are vigorous activities and may involve the use of exercise or other equipment; and that a Member may suffer temporary or permanent physical injuries. With full knowledge of the risks and in consideration of the Member the Princeton Club facilities and equipment, and pursuant to the recreational assumption of risk statute, Wis. sec. 895.525 (4) and (4m), Wis. Stats., the Member hereby releases, discharges and/or otherwise indemnifies Princeton Club and its employees, trainers, coaches or other Members as to any claims and/or causes of action by or on behalf of the Member or as legal guardian, any claims, demands, actions or causes, and damages present or future, whether the same be known or unknown, anticipated or unanticipated, to Member or as legal guardian arising out of, or connected with the use of the services or facilities provided by the Princeton Club including any claims against Princeton Club, regardless if due to the negligence of the Princeton Club its employees, trainers, coaches or other Members. This release shall remain in effect for the duration of one Membership and shall be interpreted under Wisconsin Law.

**CONSENT FOR MEDICAL TREATMENT:** With full knowledge of the risk of injury, the Member hereby authorizes the Princeton Club its employees or representatives to administer emergency medical treatment for any injury or other medical emergency while working out or participation in any sport activity. This consent also extends to the right of those persons listed above to arrange for medical treatment by a physician and/or other medical personnel and for them to provide necessary emergency care as deemed appropriate to preserve life or the well-being. As a member I hereby release, hold harmless and indemnify the above listed persons for any injury or damage related to administration of emergency care.

**MARKETING RELEASE:** Additionally, as a participant, I understand that my appearance (i.e. photographs or video), and/or voice, or the appearances and voices of any of my immediate children, is acceptable to use in marketing material and will not be compensated for use in any future promotional materials used by Princeton Club. I have read, understand, accept and agree to the forgoing terms and conditions.

**I have read and fully understand the above statements. I acknowledge that before signing I had an opportunity to discuss with Princeton Club any questions that I had about the above Release and Consent.**

**I have read, understand, accept and agree to the forgoing terms and conditions. Failure to sign below will result in an incomplete registration.**

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Signature

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Date

# PE at PC East

## Weekly Themes

Week 1 - Fun Fitness Games

Week 2 - Intro to Basketball

Week 3 - Strength Training

Week 4 - Intro to Volleyball

Week 5 - Cardiovascular Training

Week 6 - Intro to Pickleball

Week 7 - Agility Training

Week 8 - **Halloween Week** - costumes and fitness

Week 9 - Kickball

Week 10 - Fun Fitness Games

Week 11 - Basketball skills/conditioning training

Week 12 - **Thanksgiving Week** - Themed fitness games

Week 13 - Volleyball skills/conditioning training

Week 14 - Pickleball/Kickball

Week 15 - **Christmas Week** - Themed Fitness games

## Structure within the class

1. Upon arrival, every student will be required to wash their hands with soap and warm water for at least 20 seconds.
2. The trainer will then meet all students in the café area and escort them to the gymnasium as a group.
3. As student set their belongings down (6' apart), trainers will sanitize any equipment used during that class.
4. During 50 minute class:
  - warm up/set up
  - Stretching/active stretching
  - Intro to the day - what we will be doing
  - Sports weeks:
    - Explain the concept and rules of the sport
    - Explain any drills or exercises being done
    - Have sport specific games to play at end of class—keep it fun!
  - At end of class, allow time for cleanup and escort students back to café area for parent pickup.

# PE at PC East

## 2020

### Checklist of Forms to Submit Before PE at PC East Starts

- Registration Form
- Health History
- Enrollment Dates

### Checklist of Items That Should Be Sent Daily

***Having a labeled backpack*** sent with your child daily will help us make sure your child is fully equipped and safe to participate in daily activities. The backpack should include:

- ✓ Water Bottle filled with water (we can refill if needed)
- ✓ Sunscreen of SPF 15 or higher. **We may be outside if the weather is nice,**
- ✓ Sneakers and workout clothes
- ✓ Hats or sunglasses (optional – we are outside quite a bit)

**\*\*Please label each item with your child's name.\*\***

*Thank you for your cooperation in making your child's experience the best it can be at the PE at PC East Program.*