

2025 SHOEMAKER GREY WOLVES

"PACK CAMP"

STRENGTH & CONDITIONING PROGRAM

LOCATION: SHOEMAKER HIGH SCHOOL FIELDHOUSE
3302 CLEAR CREEK RD., KILLEEN 76549

DATES: 6/2-6/6; 6/9-6/13; 6/16-6/20; 6/23-6/27; NO CAMP 6/30-7/4;
7/7-7/11; 7/14-7/18; 7/21-7/25; 7/28-8/1

TIMES: SESSION I - FEMALES GRADES 7-12 - 8-10 A.M.
SESSION II - MALES GRADES 7-9 - 10 A.M.-12 P.M.
SESSION III - MALES GRADES 10-12 - 1:30-3:30 P.M.

INSTRUCTORS: SHOEMAKER MALE AND FEMALE COACHES

CAMP GOALS:

THE "PACK" CAMP IS A TRAINING COURSE DESIGNED AND STRUCTURED TO SERVICE ALL ATHLETES (MALE AND FEMALE). INSTRUCTORS WILL BE TEACHING THE LATEST TECHNIQUES AND DRILLS IN NUTRITION, STRENGTH TRAINING, PLYOMETRICS & AGILITIES NECESSARY TO BE COMPETITIVE IN EVERY SPORT. EMPHASIS WILL BE PLACED ON SETTING AND OBTAINING GOALS, AS WELL AS TRAINING SAFETY AND TECHNIQUE.

ALL ATHLETES/ALL SPORTS (INCOMING 7th-12th GRADERS) ARE ENCOURAGED TO ATTEND.

PLEASE PRINT OFF A HARD COPY OF THIS FORM AND TURN IT IN TO COACH FOREMAN ONCE COMPLETED.

NOTE: I hereby agree to and shall indemnify and hold harmless KISD, its staff and employees, from suit and liability of every kind and nature including all expenses of litigation, court cost, and attorney fees for any injury or damage the participant may sustain during the summer workouts. By my signature, I hereby and acknowledge I shall be bound by these terms.

PRINT PERSONAL INFO:

NAME: _____ GRADE (FALL 2025 SCHOOL YEAR): _____
PHONES: HOME _____ PARENT'S CELL _____ PARENT'S WORK _____
EMERGENCY CONTACT PERSON _____ PHONE: _____
PARENT SIGNATURE: _____
LAST SCHOOL ATTENDED: _____

CONTACT COACH FOREMAN FOR MORE INFORMATION:
CELL: (409) 543-5372
EMAIL: Toby.Foreman@killeenisd.org