



COACH ROZY WINTER 2025
OFF-SEASON

Dec. 1, 2025 to Feb 26, 2026
13 WEEKS OF TRAINING;
2x-3x-4x a Week

817-219-2811
www.coachrozy.com

**YANKTON OFF-SEASON
REGISTRATION - WINTER
SESSION 2025-2026**

Name _____

Address _____

City

State

Zip Code

Phone # _____ Email _____

Emergency Contact _____

Emergency Contact Phone # _____

Emergency Contact Email _____

Grade 5th _____ 6th _____ 7th _____ 8th _____ 9th _____ 10th _____ 11th _____ 12th _____

T-Shirt Size S _____ M _____ L _____ XL _____ XXL _____ XXXL _____

I GIVE PERMISSION TO "COACH ROZY" TO SEND AND BE INCLUDED IN HIS DAILY MOTIVATIONAL REMINDERS, HIS NEWSLETTERS AND WEEKLY UPDATES BY EMAIL WITH THE UNDERSTANDING THAT MY INFORMATION WILL NOT BE GIVEN OUT TO ANY OTHER PARTIES. YES _____ NO _____

**WINTER SESSION RUNS MONDAY - DEC 1, 2025 TO FEB 26, 2026; 2x-3x-4x a WK
12 WEEKS of TRAINING out of 13 WEEKS; Mon-Tues-Wed-Thurs each week**

ALL TRAINING SESSIONS AT COACH ROZY PERFORMANCE - MMU FIELDHOUSE

4x wk program _____ \$309.00 3x wk program _____ \$289.00 2x wk program _____ \$269.00

(please complete Page 2)

*Make Checks or Money Orders to AVERA SPORTS YANKTON. Credit Cards are accepted - call 605-668-8357.

Mail Registration to: Coach Rozy Performance, MMU Campus, 1105 W. 8th St., Yankton, SD 57078, drop it off at Coach Rozy Performance, or bring the filled-out form with the athlete on the first day.

Contact Mark "Coach Rozy" Roozen at 817-219-2811
email Coach Rozy at rozyroozen@gmail.com

CANCELLATION POLICY: If payment is not made by the 4th workout session of the of first week, training status will be “frozen” and access to facility and training will be denied. Athletes can cancel training sessions at any time. The refund amount will be prorated based on the number of sessions/weeks athletes used services.

SESSION POLICY: All sessions and programs must be paid in advance before any training begins (there will be a 4 day grace period at the start of each training session package). All sessions will begin at the scheduled time. No refund or credit will be granted if you are late or if you miss a session or you do not use a service offered. You agree to inform your coach of any conditions or changes in your health while participating in the Program.

INFORMED CONSENT/LIABILITY WAIVER:

The undersigned (including a parent of a minor) has requested participation in the Coach Rozy Performance Program or an Elevation Nation Bootcamp - Powered by AVERA Sports (hereinafter referred to as the “Coach Rozy Bootcamp”). The undersigned understands participation is voluntary and that they can withdraw at any time from Coach Rozy Performance or Coach Rozy Bootcamp. Any money paid to Coach Rozy Performance or Bootcamp is refundable, but certain portion of payment will be taken out for services rendered. As the undersigned, I give permission to use, reprint, and produce any photographs or videos taken of myself or my child during training with Coach Rozy Performance with the understanding that such material will only be used by Coach Rozy Performance and/or AVERA Sports to promote their programs through marketing and social media platforms.

The undersigned (including a parent of a minor) acknowledges that use of the Beresford High School Facilities -- including without limitation participation in any of the programs or activities and use of equipment and facilities may cause injury. The undersigned hereby assumes all risks of injury which may result from or arise from the attendance or use of equipment, activities, or facilities, and the undersigned agrees, on behalf of her/himself and its heirs, executors, administrators and assigns to fully and forever release and discharge AVERA, Coach Rozy and Beresford School and its respective officers, directors, employees, agents, successors and assigns (collectively, the “Releasees”) from any and all claims, damages, demands rights of actions or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from or arising out of the undersigned’s attendance at or use of equipment, activities, or facilities of Beresford Facilities. This includes, without limitation, any claims, damages, demands, rights, action or causes of action resulting from or arising out of the negligence of the Releasees. Further, the undersigned releases and discharges the Releasees from any and all liability from any loss or theft of, or damage to, personal property, and lost wages, both present and future, and future loss of earning capacity. The undersigned acknowledges that he/she (or parents if user is a minor) has carefully read this waiver and release and fully agrees to its terms.

The undersigned (including a parent of a minor) acknowledges that use of Coach Rozy Powered by Avera Sports Performance programming ---including without limitation participation in any of the programs or activities and use of equipment and facilities may cause injury. The undersigned hereby assumes all risk

of injury with may result from or arise from the attendance or use equipment, activities, or facilities, and the undersigned agrees, on behalf of her/himself and its heirs, executors, administrators and assigns to fully and forever release and discharge Avera Sacred Heart and its respective officers, directors, employees, agents, successors and assigns (collectively, the "Releasees") from any and all claims, damages, demands rights of actions or causes of action, present or future, known or unknown, anticipated or unanticipated, resulting from or arising out of the undersigned's attendance at or use of equipment, activities, or facilities where Coach Rozy Powered by Avera Sports programming is performed. This includes, without limitation, any claims, damages, demands, rights, action or causes of action resulting from or arising out of the negligence of the Releasees. Further, the undersigned releases and discharges the Releasees from any and all liability from any loss or theft of, or damage to, personal property, and lost wages, both present and future, and future loss of earning capacity. The undersigned acknowledges that he/she (or parents if user is a minor) has carefully read this waiver and release and fully agrees to its terms.

Participant Name (Please Print) _____

Participant Signature _____

Date _____

PLEASE FILL OUT AND SIGN IF PARTICIPANT IS A MINOR:

Parent or Guardian Name (Please Print) _____

Signature of Parent or Guardian _____

Date _____