

# MARC JOHNSON'S SPORTS CENTER



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## BASEBALL PLAYER DEVELOPMENT PROGRAM

Every player needs to hit because good hitters will typically find their way into the lineup! This is a hybrid program specifically designed for middle school and high school players that combines baseball hitting with the necessary components of a conditioning program that can help make you stronger and more explosive!

**OVERALL PROGRAM:** This is a five-week program that runs two days a week. Each day, players will spend 1 hour working with hitting coaches in the cages working, and 1 hour will be spent in the weight room working on functional strength, speed, agility and overall conditioning.

**DATES:** Mondays (1/04, 1/11, 1/18, 1/25, and 2/01), and Wednesdays (1/06, 1/13, 1/20, 1/27 and 2/03).

**TIMES:** 6pm – 8pm

**COST:** Cost is \$375 for the 5-week program

**BASEBALL SKILLS:** MARC JOHNSON will instruct this program that will reinforced core hitting mechanics, but the primary focus will be on the mental aspect of hitting. We will work on the approach, identifying pitches, hitting breaking balls (curve balls, sliders) and off-speed pitches, bunting skills and hit and run situations.

**STRENGTH & CONDITIONING:** LUKE MULLER from Mile High Training has designed a functional strength & conditioning program that will utilize each athlete's body and use exercises mimicking movements done on the baseball field. Training will be age appropriate and will be designed to strengthen the movements done while playing Baseball. All of the training will be designed and supervised by a Certified Strength & Conditioning Specialist by the National Strength & Conditioning Association.

### REGISTRATION INFORMATION

NAME \_\_\_\_\_ AGE \_\_\_\_\_ DOB: \_\_\_\_\_ GRADE: \_\_\_\_\_

HOME PH # \_\_\_\_\_ CELL PH: \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/ST \_\_\_\_\_ ZIP \_\_\_\_\_

PAYMENT: Cash, Check, C/C# \_\_\_\_\_ EXP DATE \_\_\_\_\_ 3 DIG CODE \_\_\_\_\_

**GUARDIAN RELEASE STATEMENT:** I/We hereby give our permission to Marc Johnson's TC Sports Center (MJSC) to provide medical attention to our son/daughter in the event of injury or illness. I/We hereby release MJSC and all its employees and instructors from all claims (present and future) resulting from any injuries that may be sustained by my/our son/daughter while attending MJSC lessons and clinics. I/We understand that baseball/softball is a dangerous sport and can result injury or death.

PLAYER NAME (Please Print) \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE \_\_\_\_\_  
(must be signed upon registration)