



2026 THUNDER STRENGTH & CONDITIONING PROGRAM



What: Students will participate in strength training, plyometrics, and agility drills to help develop strength, increase mobility, improve conditioning, and prevent injuries.

Who: Boys & Girls entering grades 9-12 in Fall 2026

Time: 7:30 AM - 9:00 AM

When: Mondays, Tuesdays, and Thursdays
Starting → Monday June 1st
Ending → Thursday July 30th
No workouts July 1 – 7

Where: Edmunds Central School Gym



Cost: There will be no cost for this program

For questions please contact:

Kevin Kunz → Kevin.Kunz@k12.sd.us or 605-321-9266

2026 Thunder Strength & Conditioning Registration Form

Athlete's Name: _____

Athlete's Age: _____ Athlete's Grade for Fall 2026: _____

Parent's Name: _____

Parent's Contact Number: _____ Parent's Email: _____

Emergency Name & Number if Parent not available: _____

Please list any medical conditions trainers should be aware of for the athlete: _____

WAIVER AND MEDICAL RELEASE FORM FOR 2026 NORTH CENTRAL SPORTS CONDITIONING PROGRAM

I, _____ (Parent/Guardian) agree that _____ (Participant) may participate in the 2026 Thunder Sports Conditioning Program at the Edmunds Central School indoor/outdoor facilities. In consideration of participation in the camp, I agree, on behalf of the above named child, his heirs and representatives to fully and forever release, discharge, indemnify and hold harmless the Edmunds Central School, along with the 2026 Thunder Sports Conditioning Program, its coaches, servants and employees from any and all claims, demands, damages, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of participation in the camp. I HEREBY AUTHORIZE IN ADVANCE ANY NECESSARY MEDICAL TREATMENT REQUIRED BY THE ABOVE NAMED CHILD WHILE IN ATTENDANCE OF THIS PROGRAM. I ALSO ACKNOWLEDGE THAT I HAVE/WILL NOTIFY THE PROGRAM PERSONNEL OF ANY SPECIAL MEDICAL NEEDS OR INFORMATION REQUIRED BY THE ABOVE-NAMED CHILD. Also, I understand that all rules and regulations for the program and Edmunds Central School, will be enforced and any violation may result in your child being removed from the program.

Signature of Parent or Guardian: _____ Date: _____