Helena High Physical Enhancement

COURSE DESCRIPTION: Physical Enhancement is a performance-based class that provides students learning opportunities to improve their overall health, wellness and physical condition through participation in a variety of resistance training and conditioning including strength, flexibility, speed and agility.

INSTRUCTORS

Mr. Broadhead <u>dbroadhead@helenaschools.org</u> 406-324-2354

Mr. Artis tartis@helenaschools.org 406-324-2364 Mrs. Engstrom jengstrom@helenaschools.org 406-324-2359

Mrs. Day <u>Iday@helenaschools.org</u> 406-324-2366

~ PHYSICAL ENHANCEMENT EXPECTATIONS AND REQUIREMENTS ~

BE RESPONSIBLE

Dress Out: Students are required to dress out every day, INCLUDING GAME DAYS, in athletic wear (athletic shorts or sweats, t-shirt with sleeves and athletic shoes that tie) and are strongly encouraged to wear Bengal colors. Clothes are available to borrow when needed. Students who refuse to dress out, will be asked to go to the office. **Be on Time:** Students have five minutes to dress out and get to class after the tardy rings.

Make up Absences: all non-school related absences must be made up in the HHS weight room in order to receive credit for missed classes

BE INVOLVED

Participate to the best of your ability in all warm-ups, lifting, and conditioning activities. **Prepare** to work hard every day. Always give your best effort. Students are expected to improve their fitness levels and maxes

Motivate yourself to improve your health, wellness and physical condition.

BE RESPECTFUL

Use equipment appropriately. **Follow** all school rules and weight room rules **Accept** the diverse abilities of classmates. **Support** and encourage classmates to improve.

BE A GRADUATE

Assessment: Attendance and participation are the minimum requirements for a passing grade in Physical Enhancement. Students can earn a daily participation grade of five points based on the following criteria:

- 1. Comes to class on time, appropriately dressed and fully prepared for all activities.
- 2. Engaged in the warm-up and correctly executes movements.
- 3. Consistently demonstrates correct lifting technique and puts forth maximum effort.
- 4. On task 100% of class time, completes all sets and reps of each exercise.
- 5. Cooperative, includes and helps other students.

WEIGHT ROOM RULES AND EXPECTATIONS

- 1. All lifters must be supervised by teacher/coach at all times. Following the program developed by that teacher/coach
- 2. All lifters must lift with a spotter at all times for all major lifts or any lift with the weight being moved overhead or across the face
- 3. Clips must be used on the barbell at all times
- 4. Return all weights and equipment to their designated spot when done using them. DO NOT move weights from one rack to another! No more than 1 pair of dumbbells on either side of the power rack
- 5. DO NOT slam weights on the floor! All lifters should maintain control of the weight through the entire lift.
- 6. School appropriate music played at all times.
- 7. No Headphones. Cell phones are only used for Teambuildr or other data entry if applicable.
- 8. NO horseplay or messing around allowed in the weight room. If you cannot follow this rule, you will be asked to leave.
- 9. Proper workout clothes (T shirt and gym shorts or sweats) and tennis shoes that tie are required at all times (slip on shoes are not considered tennis shoes!). T shirts must cover the midriff area during all lifts and exercises (no crop top shirts).
- 10. Work hard every time you use this room! NO EXCUSES!

Semester tests are administered on assigned testing dates and may start the week prior to semester test days. Testing includes max bench, squat and clean and selected agility/speed tests.

Points will be recorded weekly	
Letter grades are based on these percentages	

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By signing below, the student and parent/guardian acknowledge and agree to the Physical Enhancement expectations and requirements. Please return the bottom portion to your instructor.

Student Name (PRINTED):	
Student Name (SIGNED):	Date:
Parent/Guardian Name (PRINTED):	
Parent/Guardian Name (SIGNED):	Date:
Be involved Be a Graduate	

Rai Rennnelhie

Please indicate any medical conditions or physical limitations you feel your instructor should be aware of: