

### **FITNESS ASSESSMENT DATES 2019**

Congratulations on your selection to the 2020 SA Masters World Cup Squad. Our aim is to have the strongest, most skilful and fittest SA World Cup squads taking to the fields in Nottingham and Cape Town.

The fitness team has put together a fitness profile assessment for each player so that we can manage all player's fitness, strength and prevent injuries over the next twelve months.

The first fitness profile will be in September on a provincial level for logistical reasons. The next three will be team based at the February camp, April IPT and June camp. Please note that every player needs to attend all fitness sessions so that we have a profile on you. If you are injured, we need to assess your injury and make sure that you are getting the correct support.

We can be contacted at anytime via phone or email and we are happy to speak to trainers, physios, bios, etc.

Dates for fitness assessments as follows:

## **Durban at Queensmead**

Thursday 12 September 18:00

## **Cape Town at WPCC**

- Sunday 8 September 10:00-13:00
- Monday 16 September 18:30-20:00
- Tuesday 17 September 18:30-20:00
- Wednesday 18 September 18:30-20:00

### Johannesburg and Pretoria - venue TBC

- Saturday 28 September 14:00-18:00
- Sunday 29 September 9:00- 14:00
- Monday 30 September 17:00-20:00.

**PE, East London and Bloemfontein** someone will contact you.

All overseas based players please mail me on elaine@fitnessconnect.co.za

Please confirm with your manager which session you will be attending. You will need to complete the attached medical questionnaire and bring it with you to the assessment.

Regards

**Elaine Harvey** 

0832707423

elaine@fitnessconnect.co.za or contact your manager



# **Medical Survey**

Name	
Date of birth:	
Next of Kin ( Name	
and Contact number)	
Medical Aid:	
Medical aid number	
Medical conditions	
(Including chronic	
conditions/ take	
meds for anything)	
Medication	
(do you take any	
daily medication)	
Surgeries	
Past Concussions	
(year)	
Previous injuries	
(injury and	
year/month)	
	1



Supplements	
Physiotherapist, Doctor a accessible by the Medica may be withdrawn at an	iven above is true and valid, I Consent to Treatment by the Team and Biokineticist for the year 2019/2020. The above information will be all doctor, Physiotherapist and Biokineticist. Your consent to treatment y time during the year. By signing this document you have consented to mentioned medical staff.
I give consent to be teste monitored	ed over the course of the season so that my fitness results may be
any supplements please	agency has a zero tolerance against drugs in sport. Should you be taking be aware of ALL the ingredients, you are responsible for the outcome of ere is a doubt of whether your supplements are clean and should you wish
•	hibited list of drugs in sport it will be made available to you.
Signature:	Date: