

**ALEX VAN DYKE'S GOING VERTICAL  
ATHLETE INFORMATION**

NAME:		PRETEST DATE:	
ADDRESS:		CITY:	ZIP:
PHONE:	EMAIL:		
HEIGHT:	WEIGHT:	BIRTH DATE:	
MALE/FEMALE:	EMERGENCY CONTACT:		
SCHOOL:	GRADE/YEAR	SPORT(S)	
HOW DID YOU FIND OUT ABOUT GOING VERTICAL?			

**Program:      Date:**


	WEEK 1	PHASE
1		
2		
3		

	WEEK 2	PHASE
4		
5		
6		

	WEEK 3	PHASE
7		
8		
9		

	WEEK 4	PHASE
10		
11		
12		

	WEEK 5	PHASE
13		
14		
15		

	WEEK 6	PHASE
16		
17		
18		

	WEEK 7	PHASE
19		
20		
21		

	WEEK 8	PHASE
22		
23		
24		

	WEEK 9	PHASE
25		
26		
27		

	WEEK 10	PHASE
28		
29		
30		

	WEEK 11	PHASE
31		
32		
33		

	WEEK 12	PHASE
34		
35		
36		

	WEEK 13	PHASE
37		
38		
39		

	WEEK 14	PHASE
40		
41		
42		

	WEEK 15	PHASE
43		
44		
45		

	WEEK 16	PHASE
46		
47		
48		

**SHIRT**