

“Basketball Wellness Program”
Presented By Damato Chiropractic Center

Improve Biomechanics
Improve Balance and Muscle Tone
Prevent Injury

- **Massage**
- **Adjustments**
- **Nutrition**
- **Neurological and Balance Exercises**

Fee \$150 per athlete
Includes:

Dr. Damato 1 day per week at the school
Massage therapist 1 day per week at the school
Food log and nutritional recommendations
Exercises specific to individual athlete

Those who wish to participate must fill out consent form and mail check to:

Damato Chiropractic Center LLC
93 Market Square
Newington CT, 06111

Signature of Participant

Printed Name of Participant

Date

If the participant is under 18 years of age, a Parent / Guardian must also sign:

I am the **legal parent / guardian** of _____ I hereby **give permission**
to my child(ren) / ward(s) to participate in the **“Wellness Program”**.

Signature of Parent / Guardian

Printed Name of Parent / Guardian

Date