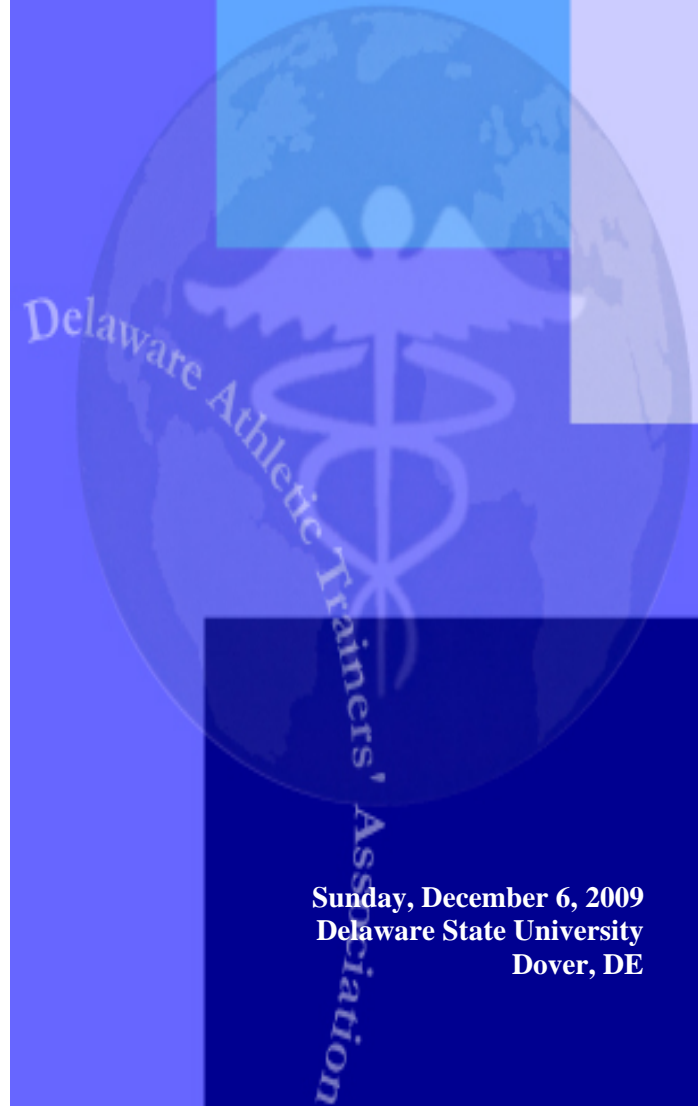


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# Delaware Athletic Trainers' Association

Fall 2009 Business Meeting & Clinical  
Symposium

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Sunday, December 6, 2009  
Delaware State University  
Dover, DE

John Smith - DATA  
C/O University Of Delaware  
111 Delaware Fieldhouse  
Newark, DE 19716

## Program

**Sunday, December 6, 2009**

**8:45-9:00 AM**

**Registration/Welcoming Remarks**  
**Delaware State University, Dover, DE**  
John Finley, ATC, (President – DATA)  
Goldey Beacom College

**9:00 – 10:00 AM**

**Beyond Zurich – Delaware Concussions Today**  
Tony Reed, MD  
Director, Sports Medicine  
Family & Community Medicine  
Christiana Care Health System

**10:00-11:00AM**

**Factors Affecting Overuse Injuries of the Knee**  
Glenn Brown, PT/ATC  
Pro Physical Therapy

**11:00-12:00 PM**

**LAB: Making a Cockup Splint**  
Mary Mundrane-Zweiacher, PT, ATC  
Christiana Health Care

**12:00 – 1:15 PM**

**DATA Business Meeting**  
John Finley, DATA President  
(LUNCH provided)

**1:15– 2:15 PM**

**Exercise Progression of the:  
Squat, Hang Clean, Hang Snatch**  
Ryan Johnson, CSCS  
Head Strength & Conditioning Coach  
Delaware State University

## Faculty /Presenters

**Glenn Brown, PT/ATC PRO PT**  
**Tony Reed, MD (Delaware State University)**  
**Mary Mundrane-Zweiacher, PT/ATC**  
**Ryan Johnson, CSCS Delaware State Univ.**

## General Information

### Time & Location

The program will be held Sunday, December 6, 2009 in the Bank of America Building, Room 309, at Delaware State University. Host is Bill Yanowsky, Head ATC <http://www.desu.edu/directions>

### Continuing Education Credits

Each participant will be awarded five (5) continuing education credits from the N.A.T.A.

### Registration

Advanced Registration is encouraged. Registrations received by Tuesday, December 1, 2009 will receive an e-mail confirmation. To register, complete the attached form and return with payment.

Return to: John J. Smith, MS/ATC  
University of Delaware  
631 S. College Ave.  
Newark DE. 19716

### Register On-Site

Registration and payment can be made on-site. If you plan to attend please fax or E-mail the registration form to confirm your attendance. Fax (302)-831-4023 E-mail: [jsmith@udel.edu](mailto:jsmith@udel.edu)

### Fee

The fee includes course materials, refreshments, continental breakfast, & lunch.

## Registration Form

Please return this completed registration form with full payment by Dec 1, 2009.

**Make checks payable to DATA.**

Dr.     Mr.     Mrs.     Ms.

Name \_\_\_\_\_.

NATA # \_\_\_\_\_.

Email \_\_\_\_\_.

Address \_\_\_\_\_.

City \_\_\_\_\_.

State \_\_\_\_\_ . Zip Code \_\_\_\_\_.

Place of Employment \_\_\_\_\_.

\_\_\_\_\_.

Address \_\_\_\_\_.

City \_\_\_\_\_.

State \_\_\_\_\_ . Zip Code \_\_\_\_\_.

Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_.

### Fee

\_\_\_ \$30.00 Non-DATA member

\_\_\_ \$20.00 DATA member Registration

\_\_\_ FREE: Student Registration

\_\_\_ On-site Registration

Registration Check # \_\_\_\_\_.

## For More Information Contact

John J. Smith

Email: [jsmith@udel.edu](mailto:jsmith@udel.edu)

Phone: c: (302) 562-5337

o: (302)-831-2196