Learn more!

NEXTSTEP PROGRAM

Your Bridge From Therapy to Lifelong Wellness

A guided transition from physical therapy to independent exercise, built to keep you moving safely, confidently, and consistently.

The YMCA NextStep Program is designed to help individuals safely transition from physical therapy to independent exercise by providing a supportive, structured environment focused on long-term wellness. Through a referral from a physical therapist or physician, participants gain access to YMCA facilities and a complimentary Kickstart session with a certified personal trainer to build confidence, reinforce proper movement, and continue their progress.

Our goal is to promote lasting post-rehabilitation health by reducing the risk of re-injury, improving strength and mobility, and helping individuals develop sustainable, healthy habits beyond their time in therapy

***Available exclusively at the YMCA of Northern Rock County**

To get started, have your doctor or PT fill out the NextStep Referral Form

Questions? Please contact:
Johanna Adams | jadams@ymcanrc.org

PROGRAM HIGHLIGHTS

- $99 for a full 3-month program (must be paid in full)
- Requires referral from a physical therapist or physician
- Start the program with a free Kickstart session with a certified YMCA Personal Trainer
- Program is available one time per participant
- Focuses on safe movement, mobility, and long-term wellness habits
- Physical therapists and physicians may check participant usage
- Only available at the YMCA of Northern Rock County

WHY NEXTSTEP WORKS

- Promotes continued progress after therapy
- Reduces risk of re-injury through proper movement guidance
- Builds confidence in a supportive, supervised environment
- Encourages sustainable healthy habits for lifelong strength

FOR YOUTH DEVELOPMENT®
FOR HEALTHY LIVING
FOR SOCIAL RESPONSIBILITY

NEXTSTEP Referral Form

PT/OT/DR Referring _____

Organization _____

Email _____

Phone _____

Date of Referral _____

Membership must be activated within 6 months of referral date

Full Name of Referral _____

Referral DOB _____

This form must be presented at time of membership enrollment.

*Does not qualify for HSA

ONLY available at the YMCA of Northern Rock County (Janesville & Milton locations)

Questions? Please contact:
Johanna Adams | jadams@ymcanrc.org