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After personally coaching thousands of people ranging from elite level professional athletes to guys just trying to lose a few pounds and feel better and achieving incredible results across the board then studying the impact of every single training variable, I've developed a breakthrough solution and put it into a format that YOU can use to guarantee the same type of incredible results yourself.



The Show and Go Cast-Iron 8 Week

Money-Back Guarantee I'm going to make a bold statement here and state that I KNOW you are going to get some serious results with this system. I know because I've used it with myself and my clients every single month.... and I'm so convinced that you're going to be able to get serious results with the Show and Go Training system, that I'm going to put my money where my mouth is, and GUARANTEE it. So go ahead and download the training templates, manuals and videos now. And if after following the program for 8 full weeks you're not happy with whatever the results you've made, let me know, and I'll personally issue a refund. No questions, no arguments, and no changing my mind. It's set in stone. Seriously – if for whatever reason you are unhappy with the Show and Go training system at all, shoot me an email and I'll make sure you get a prompt and courteous refund. Guaranteed.

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Baby Sleep Miracle



Co-sleeping is the practice where the child sleeps in bed with his parents. Not surprisingly, it is one of the most hotly debated and controversial topics related to pediatric sleep. Let's see why.

Some people argue that co-sleeping is the right and natural way to raise a child because the practice fosters a stronger bond and a more secure attachment.

Conversely, others will tell you that co-sleeping is risky, ridiculous, or even dangerous and they don't want it for their family.

So, which approach holds the truth?

First, it's important to understand that co-sleeping is not magic. Although some proponents of the family bed would disagree, numerous couples have reported that their babies did not necessarily sleep deeper or longer because their parents were close by. In fact, some parents found that their child slept longer and woke less frequently when they stopped co-sleeping and moved him into his own crib.

However, whether families choose to co-sleep or have their children sleep independently is a personal decision, and if both parents and child are safe, rested, and fulfilled, then co-sleeping is nothing to worry about.

If you decide to co-sleep, this commitment requires some very careful thinking about what you and your spouse feel is right for you as individuals, as a couple, and as a family.

Ask yourselves the following questions:

- Is it nice to think about enjoying the coziness of sleeping in close proximity, or does one or more of us tend to stay active during sleeping – potentially disrupting the others?
- Does everyone in our family want to co-sleep, or are we leaning toward it because one of us feels strongly?
- Are we willing to commit to being quiet after our child falls asleep, or do we like to watch TV or talk in bed?
- Will we enjoy being able to feed our baby more often throughout the night, or will having him next to us make it tougher to wean nighttime feeds?
- Are we agreeable to getting into bed when our child does, to ensure his safety?
- For working parents, does sleeping next to our child allow us to feel more connected to him?

As expected, co-sleeping has both advantages and disadvantages.

Let's take a closer look at them.

Advantages:

- Constant closeness whenever the child is awake. Many children and parents enjoy this feeling.

- Immediate action and support for any sleep-related problem
- The ability to nurse and respond to other nighttime wakings without getting up
- More time to spend with the child
- Possibly better sleep for both the child and the parents, if the child was sleeping poorly to begin with

Disadvantages:

- Parents may sleep poorly if their children are restless sleepers
- Parents may end up sleeping in separate rooms, and they may become angry at their child or with each other
- Children's and adults' sleep cycles do not coincide
- Parents may have to go to bed at a very early hour with their children and be left with little time for their own evening activities
- Parents have little privacy
- There may be a slight increase in the risk to the infant from SIDS and related causes.



The decision to co-sleep should be yours, made by the parent –

or parents – and based on your own personal philosophies, not on pressure from your child or anyone else. Another family's good or bad experience with co-sleeping should not influence your decision: your child is unique and your family is not the same.

I want out! That's the message your toddler will send – one way or another – when he's ready to wave goodbye to the crib and say hello to a big-kid bed. Your child might actually verbalize displeasure, or more likely, simply climb out of the crib.

So, what needs to be done?

First, resist the temptation to move him too early. Most experts recommend doings so around age 3. Unless your child is climbing out of his crib or needs more space than a crib can provide – his body is growing at an astounding rate – it's better to keep him in the crib, which allows him to feel safe. This way, your child can feel comfortable taking giant developmental leaps during the day but still regress to the security of his old crib at night.

Moreover, until age 3, toddlers are very impulsive, and your child's difficulty in understanding and being able to follow directions or rules (like staying in bed all night) will make sleeping in a bed a real challenge. If you transition to a bed before age 3, you can plan on waking up to a little visitor next to your bed pretty much every night.

When the time comes, however, you need to help your child transition smoothly to sleeping in a bed. For that, you need to follow certain steps. These are:

1. Create a safe environment: Safety proof your child's room and any adjacent areas he may be able to visit into the middle of the night. Secure windows, tops of stairs,

and any stepstools that can be tripped over. Even better, you can install a safety gate at your child's door. You can even install a small night-light in his room to help him orient himself and avoid hurting himself.

2. Pick the mattress: Go to the mattress store – or any other store that sells mattresses – and let your child help you choose the mattress or bed. With safety in mind, all you need is a twin-size mattress and box spring and some safety rails for the side. You should adjust the height of this new bed accordingly, as it will need to sit low on the floor for some time until your child gets used to it. Get some fun new sheets, some special pillowcases and you're set to go.
3. Disassemble the crib (together): Once the new bed comes home, ask your child to help you to take down the crib. This way, your child will feel part of the transition process and will also be able to say good-bye to the crib.
4. Set up the bed: Put the bed in a corner of your child's room so that the head and side of the bed are flush against the wall for protection. Add a safety rail to the exposed side of the bed. Your child will feel safe this way, just as he did in his crib.
5. Explain the rules of bedtime: If your child is verbal before the first night of sleeping in the bed, go over the rules of bedtime with him. Tell him that he is a big boy now who needs to understand that when we go to sleep, we only wake up when the sun is nice and bright.
6. Do your bedtime routine: During the first few nights your child is sleeping in his new bed, take an extra 10 minutes of reading time together to make him feel comfortable in his new environment. The idea here is to make your child feel safe. If your child seems excited about the new bed from the very start, you're one of those luck people who has made this transition easily.

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Early morning wakings are one of the toughest sleep problems to fix, if not the toughest. If you're wondering why, it's because after a decent night's rest your child has got more energy to fight sleep in the morning. And the truth is, all of us come up into lighter sleep phases in the last hour of our sleep, preparing to take up for the day.

Remember, however, your child is waking early only if he is not getting the right amount of night rest for his age and his body. In other words, if your child sleeps from 7 PM to 6 AM, it's a perfectly reasonable schedule for him, even though it might feel early to you.

We can't ask our children to sleep more than 11 hours at night. Their bodies are usually rested after this much sleep, and they won't be able to do more.

Also keep in mind the following fact: if your child is waking even at 10/½ hours, if he is rested and energetic in the morning and makes it easily till his naptime, then he's getting enough rest for his body.

Problems arise if your child sleeps from, say, 7 PM to 5:30 AM. In this case, you'll need to push the bedtime later by 15-minute increments, then watching to see if your child can sleep later in the morning,

A word of caution, though: Making the bedtime later can often have the opposite effect of causing your child to wake up earlier. This is the reason why things need to be done in small steps.

Here are some other ideas to try if your child is an early bird:

- Make sure that your child's room is very, very dark.
- If there are any sounds that could be waking him – such as garbage trucks, barking dogs, sprinklers – put white noise in the room and make the volume loud enough to protect him from these sounds
- Remove all stimulating toys from your child's crib or bed,

which can be distracting once the sun enters his room.

- If you are checking in on your child within the last hour before his wake time, your interaction may prevent him from returning to sleep. Don't check on him if it's less than one hour till his wake time.
- Make sure the bedtime is not too late for your child's age. Adjust the bedtime earlier by 15-minute increments, and watch what happens in the morning. In doing so, you will allow your child to sleep later, as he is less overtired at bedtime. If he does wake earlier, return to your previous bedtime. If moving the bedtime earlier has no effect on the wake time, you may want to consider using the earlier bedtime anyway to help your child get the right amount of night sleep for his age.
- Make sure your child is not hungry. If you have a child under 12 months and have newly begun to wean feedings, you may want to slow the process down to give him more time to adjust. Moreover, be careful to ensure that you are offering the breast or bottle more often during the day to help him transition his previous nighttime feeds to the daytime, so he won't be hungry going down for sleep at night.

Seeing your baby cry is perhaps the most heartbreaking moment of all. You don't want him to cry. You want him happy. And of course, you want him healthy. But for all that to happen, he needs to sleep properly.

It would be nice if your child could learn how to sleep without any crying or frustration whatsoever. Every parent would sign up for that. Unfortunately, the truth is that all children, regardless of the method you use to help them sleep, inevitably do shed some tears in the process. Let's see why.

First and foremost, children cry when learning to sleep because they are protesting – they don't like change. In fact, they hate change. Just think about it.

Do you remember what your favorite book was as a kid? Do you remember wanting to read that book over and over again, even though you knew every word of it?

We all resist change, children and adults alike. It's normal to do so, and it's normal for your child to express his resistance by crying. After all, crying comes before words – not the other way around.

Second, as children begin to learn how to sleep but haven't yet figured out how to do so, they are understandably frustrated. They no longer have Mom and Dad on their side to help them get to sleep, and they don't yet know what to do differently. They will eventually.

What's really interesting about falling asleep is that although each of us is born with the inherent ability to do so, it is considered a learned behavior. And yet you can't teach anyone else how to do it – you can't simply say to your child to close his eyes and sleep. Instead, each of us has to learn for ourselves what to do to settle into sleep.

Of course, there are children who seem to learn how to sleep almost magically, with very little effort on the parent's part. However, children are different. Everyone is unique.

Your child, along with many others, hasn't learned this essential skill yet, which is why he needs you to take a step back, so he has the opportunity to achieve that on his own.

How will he do it? He might kick his legs around a bit, he might gently rock his head from side to side, or he might grab his lovey. Or maybe he'll suck on his thumb. If he's a bit older, maybe he'll play with his hair.

The truth is, each of us has different things we do to soothe ourselves into sleep, and your child will surely find a way that's perfect for him. But he won't discover those things nearly as easily with you standing right next to him or picking him up – he won't have the motivation to do so.

Simply put, if you "help" him, he will cry even harder because the touching feels like a tease that serves to reinforce the crying.

Although your baby may give up regular nighttime feedings on his own by the time he's three months old, do not expect – or

insist – that such a young infant give them up altogether, all of a sudden.

But if your child is at least three months old, still nurses or requires a bottle at bedtime, and needs to eat again several more times during the night, then the extra feedings may well be causing the extra wakings. If that is the case, you may be able to help him sleep better by decreasing the number of these feedings.

However, if your baby takes in a substantial amount of food – from extended feedings at the breast, or bottles adding up to more than eight ounces over the course of the night – then he has learned that certain times of night are mealtimes. To eliminate these feedings suddenly wouldn't be wise or nice.

The amount of milk or juice your child drinks during the night may be considerable. If he finishes four full eight-ounce bottles, that is a large amount for even an adult to consume overnight.

Solving The Problem

If you have concluded that excessive and unnecessary feedings at night are disrupting your child's sleep, you will be relieved to learn that although such feedings can lead to severe sleep disturbances, the problem is also one of the easiest to fix.

Two things need to be addressed. The first is to reduce or eliminate the nighttime feedings to avoid their various sleep-disrupting effects. The second is to teach your child new sleep associations so that he can fall asleep without being held, without eating, and without sucking on the breast or bottle. You can do these things at the same time, or one at a time.

To fix the problems caused by the feedings, start by gradually decreasing the number of nighttime feedings, their size, or both. Just don't stop the feedings suddenly. A program designed to allow new patterns to develop will be easier for him to follow.

Your goal is to gradually move your child's feelings of hunger out of the nighttime and into the daytime. Once there is only a single remaining nighttime feeding left, you can choose to stop that feeding right away – instead of gradually – if you prefer, since the total amount of ingested food during the night is now fairly small.

If you are working on sleep associations and hunger patterns simultaneously, put your child in bed as soon as each feeding is over, even if he wakes and begins to cry. If you nurse him and he sleeps next to you, move him off of you when the feeding is done so that he can learn to fall asleep without using your breast as a pacifier. You've just fed him, so he is not hungry – now you are only changing his expectation of what happens while he falls asleep.

Within a week, if all goes well, you will have finished cutting down or even eliminating the nighttime feedings. After that, continue applying the technique of progressive waiting at any waking at night (except for feeding times) until the wakings stop. It should not take more than another few days.

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