

**2009 UW-PARKSIDE SUMMER WRESTLING CAMP****BOYS & GIRLS - AGES 8 -18 YEARS**

**DATES:** Monday - Thursday, June 15-18, 2009 Takedown Wrestling  
Monday - Thursday, June 22-25, 2009 Mat Wrestling

**TIME:** 6:30 - 8:30 PM

**FEES:** \$80 for both weeks - \$45 for one week

Please note: After the first day of class no refunds will be issued unless your child misses 4 or more days at which point we will refund half of your payment minus a \$25.00 nonrefundable administrative fee. Make checks payable to UW-Parkside Athletics.

**STAFF:** Headed by UW-Parkside Wrestling Coach Jim Koch

Each camper receives a Wrestling Camp T-Shirt and quality instruction. The camp will stress basic fundamental techniques that young wrestlers need to learn in order to be successful. Takedowns, takedown counters, set-ups, escapes, reversals, leg wrestling, breakdowns, rides and pins will all be covered. Weight training, conditioning, motivation, nutrition and mental preparation will be discussed.

**WRESTLING CAMP REGISTRATION**

Please Print

NAME \_\_\_\_\_ BIRTHDATE \_\_\_\_\_

ADDRESS \_\_\_\_\_  
STREET CITY STATE ZIP

SCHOOL \_\_\_\_\_ GRADE (as of 9-1-09) \_\_\_\_\_

NAME OF PARENT/LEGAL GUARDIAN \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

SESSION (CHECK ONE)  1ST WEEK TAKEDOWNS  2ND WEEK MAT WRESTLING  BOTH WEEKS

Adult t-shirt size  
(circle one)

S M L X-L

If your son or ward will be under the age of 18 years while at our camp, it is our policy to secure your consent for medical treatment. In case of illness or injury, permission is granted to treat the participant at an appropriate medical facility. By signing below you are giving your consent in advance for medical treatment. Campers are encouraged to have their own health insurance as limited accident insurance is provided by the university.

Furthermore, as a participant in the camp/clinic, hereby state that I am aware of and accept the risk inherent in the program activity. The undersigned does hereby agree to hold harmless and indemnify the State of Wisconsin, the Board of Regents of the University of Wisconsin system, and the University of Wisconsin-Parkside, their officers, agents and employees, from any and all liability, loss damages, costs, or expenses which are sustained, incurred, or required arising out of the actions of any dependent in the course of the camp/clinic.

\_\_\_\_\_  
Signature of Parent/Guardian\_\_\_\_\_  
Date

Koch/wrestlin/wr camp

Please return form to:  
UW-Parkside Wrestling Camp  
Athletic Department  
P.O. Box 2000  
Kenosha, WI 53141