



Session 6 All-girls Camp & Tournament



Featuring

Mike Clayton



USA
Wrestling
Coaches
Education

USA Wrestling's Director of National Coaches Education Program.
- US Fila Cadet Pan-Am Co-headcoach
- Creator of the Session 6 Championship Training Log.
*Coached at Army, Stevens IT, Apprentice.
*Wrestled at Navy (NCAA Qualifier)

Forrest Molinari



Hawkeye
Wrestling
Club

*2019 US Open Champion
*2x U23 World Team Trials Champ
*2018 Pan-AM Gold Medalist
*Dave Schultz Memorial Champion
*2017 Pan-AM Bronze Medalist
*2016 WCWA National Champion
*3x WCWA All-American (King Univ.)

SUNDAY, JUNE 9

Pre-register: \$35

Register by May 17 to guarantee a shirt.

Walk-ins: \$45

Fee: \$35 includes clinic & tournament

Make checks to: Cement Mixer Wrestling Club

Questions: Reggie Rea 319 899-2880

B-G-M High School

1090 Jackson Street

Brooklyn, IA 52211

Camp Schedule:

1:00-1:45 Registration & Weigh-in	South Cafeteria
2:00 Session 1	South gym 3-6 & North gym 7-12
3:00 Session 2	South gym 3-6 & North gym 7-12
4:00 Tournament	North gym

Tournament Info:

4 girl round robin brackets
Awards for champion
Folkstyle rules

Tournament Divisions:

Tournament Divisions:	Periods:
Bantam 3-5th grade	1-1-1
Junior 6-8th grade	1-1-1
Senior 9-12th grade	1-1-1

*There is no discount if you participate in the clinic only. Cost is \$35 regardless.

*T-shirts are \$13 (not included in the price of the clinic/tournament).

***Make sure you check-in no later than 12:45**

This form must be completed and turned in before your registration is complete.

PLEASE WRITE NEATLY!

Name of Camper _____ Parents or Legal Guardian _____

Address _____ email _____

City _____ State _____ Zip _____ Phone _____

Grade next year _____ Age at camp _____ Current Weight _____ lbs.

Accident & Medical Insurance Company _____

Policy Number _____

Insurance Company Address _____

Policy Owner _____

CAMPER MEDICAL INFORMATION

This is the application for enrollment of _____ (camper's name) in the Session 6 Team Camp on the above dates. I grant permission to the camp director, assistants or assigned chaperones of the camp to act on my behalf for said minor in granting permission for evaluation/treatment of minor medical problems. I understand that should a major medical problem arise, an attempt will be made to notify me by telephone. In the event that I can not be reached, I hereby give my consent to such medical treatment as deemed necessary by a licensed physician, such as x-ray examinations and anesthesia to be rendered to said minor. In addition, I hereby release the BGM Community School District and its employees, the Session 6 Team Camp Directors and camp staff from all claims on account of any injuries that may be sustained by my child while attending the Session 6 Team Camp. I also agree to indemnify the BGM Community School District and its employees, the Session 6 Team Camp Directors and camp staff for any claim, which may hereafter, be presented to my minor child as a result of any such injuries. I also grant permission for the Session 6 Team Camp to use photographs of my child for publicity, advertising, or other commercial purposes. This camp admits all qualified applicants without regard to disability, race, color, religion, national or ethnic origin, or sexual orientation.

I HEREBY CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THIS AUTHORIZATION.

Parent/Guardian Signature _____

Date Signed _____

Medications currently taking: _____

Allergic reactions to: _____

Any past illnesses or other information that would be useful in the event medical treatment is necessary:

Please pre-order me a camp t-shirt for \$13. Size _____ (YM-AXXL) (Total \$35 no T-shirt or \$48 with T-shirt)

Please include t-shirt money with registration.

MAKE CHECKS OUT TO Cement Mixer Wrestling Club.

SEND REGISTRATIONS and payment to: Reggie Rea

1823 385th Ave

Brooklyn, IA 52211

Experience level:

- _____ AAU State Participant
- _____ Some experience (2 yrs or more)
- _____ Just starting