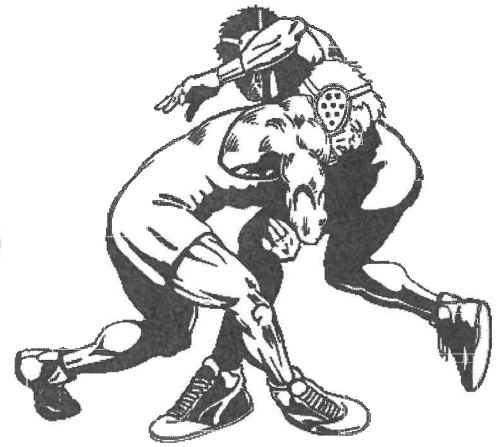


WESTOSHA WRESTLING CLUB



Practices begin Sunday April 28th!

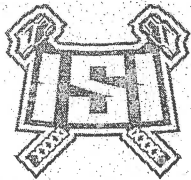
WHO: Grades 6-12

WHEN: Sundays 6:00pm-7:30pm, may expand based upon interest.

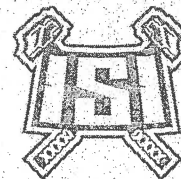
WHERE: Central High School Wrestling Room, Gym Balcony, Enter through Door 29 North East Corner of Gym

DRESS: Athletic Shorts and T-Shirt

ADDITIONAL INFO: Open to all ability levels. Great opportunity to learn about the sport or take your skills to the next level. Contact Cort Shane (cshane@levelconstruction.net) or Jason Ladd (laddj@westosha.k12.wi.us) with any questions. There is no registration fee. Registration form will be available at practice.



IRON SHARPENS IRON TEAM CAMPS WRESTLER REGISTRATION FORM



CAMP HEADQUARTERS: ISI TEAM CAMPS 1307 Hummingbird Cir Waterloo, IA 50702 (319) 404-0722
Website: www.isiteamcamps.com

Name _____ Sex _____
Last First Middle

Home Address _____ Phone _____

City _____ State _____ Zip Code _____

Emergency Contact _____ Emergency Phone _____

Birthday _____ E-Mail _____
Month Day Year

Team Name (if coming with team) _____ Last Completed Grade _____

Name of Parents _____

Health Concerns _____

Camp Fees

Camp Registration: \$120 (Team of 6 or more)
Camp Registration: \$150 (Individual)
Guardian/Chaperone: Free
Coaches: Free

Build your own camp:

Meals: (Circle if any, include guardian meals if staying)

Lunches Only \$30
Lunches and Supper \$65
All Inclusive \$85

Dorms: (Fill out how much your dorm stay is, include guardian dorm if staying*)

Loras College \$20/night = _____
All other camps \$25/night = _____

Camp Fee Total _____

**Children staying in the dorm without a team and younger than 6th grade must be accompanied by an adult.*

Camps

Select what camp(s) you would like to attend.

Loras College June 10-13th

Earlham College June 26-June 29th

Illinois Wesleyan University July 9-12th

Grinnell College July 17-20th



Authorization and Release

Release must be signed by parent or guardian if applicant is under age 18 as of the date of this release.

Applicant's Name: _____ Birth Date: _____

I hereby certify that facts in this entry form are true and correct. I certify that the birth date is correct. I understand that by participating in the Iron Sharpens Iron Team Camps, the name, photograph or other image, and other information (including but not limited to age and hometown) relating to the participant may be used for publicity purposes. Publicity purposes may be in the form of brochures, postings on the tournament web site, videos, displays, radio programs, newspaper releases or articles, or other forms of media.

The undersigned Applicant, for his or her heirs, assigns and legal representatives, releases, discharges and holds harmless the Iron Sharpens Iron Team Camps LLC, Joel Allen, Steve Farrell, all camp and title sponsors, Loras College, Earlham College, Grinnell College and Illinois Wesleyan University and their affiliates, their directors, officers, members, employees, staff, volunteers, agents and representatives from any and all liability for any events or consequences whatsoever and in any manner arising out of or related to Applicant's entry and/or participation in this camp, including but not limited to personal injuries sustained by Applicant.

In the event of a medical emergency occurring during the camp, the undersigned hereby authorizes all necessary measures in the medical treatment of Applicant.

Signed _____ Relationship to Wrestler _____
Signature of Parent or Guardian

Date _____ Name of Chaperone (if needed) _____ (Male/Female)