

CARRINGTON WRESTLING CAMP

JULY 29TH – JULY 31ST, 2010

The Carrington Wrestling Club is offering a camp for wrestlers entering grades 3rd through 9th or any JV wrestler. Our goal is to teach young kids the fundamentals needed to be successful at the sport of wrestling. We hope to help them advance their skills and perform at their personal best. We stress the importance of being focused while having fun.

CLINICIANS

SCHEDULE

Cost: \$100.00

Includes:

Camp T-Shirt
Shorts

**Registration and fees
due July 1st**

registration fees are non-refundable

Limited to the first 60 wrestlers

*Camp will be held at
Carrington Armory
1000 1st N
Carrington, N.D.*

***Host Families will be
Provided for out of town
Wrestlers*

Make checks payable:

*Carrington Wrestling
525 4th St N
Carrington, ND 58421
701-307-0432*

Mike Peterson(Carrington)
3 time State Champion

Tyler Johnson (Bismarck High)
3 time State Champion

Trevor Johnson (Bismarck High)
2 time State Champion

Troy Jangula (Napoleon)
State Champion

Aaron Larson (Carrington)
State Champion

Justin Jensen (Carrington)
2 time State Champion

Kelly Hagel (Carrington)
State Champion

Craig Zachmeier (Mandan)
2 time state Champion

Shannon Johnson (Napoleon)
2 time state champion

And More

Thursday July 29th:

8:30 - 9:30 Registration

9:30 - 12:00 Practice (Takedowns and drills focused)

12:00 - 1:15 Lunch

1:30 - 4:15 Practice (Drills and live wrestling focused)

6:00 - 8:00 Dinner and evening activity

Friday July 30th

9:00 - 9:45 Running/Cardio

9:45 - 12:00 Practice (bottom wrestling and drills focused)

12:00 - 1:15 Lunch

1:30 - 4:15 Practice (top wrestling and live wrestling focused)

6:00 - 8:00 Dinner and evening activity

Saturday July 31st:

9:00 - 9:45 Running/Cardio

9:45 - 11:30 Practice – Burnout

12:00 – 2:00 Takedown Tournament ****We may have a Folkstyle Tournament on this day if our high school is available**

****Lunch and Dinner will be provided**

Name: _____ Age: _____ Weight: _____

T-Shirt: YS YM YL YXL AS AM AL AXL Email: _____

Address: _____ City/State/Zip: _____

Phone: _____

My child has permission to attend the Carrington Wrestling Camp. Enclosed is the money to cover the cost of the camp. I have no knowledge of any physical impairment that may affect my child's participation in the Carrington Wrestling Camp. I authorize the staff of the Carrington Wrestling Camp to act for me according to their best judgment in any emergency requiring medical attention, and I agree to bear the expense of such procedures. I understand Carrington Wrestling Camp is not responsible for any accident or injury.

Parent/Guardian Signature: _____