

PURLER WRESTLING TEAM CAMP @ KETTERING FAIRMONT

Monday-Friday, June 26-30, 2017

DAILY SCHEDULE

MONDAY-THURSDAY

9:00-11:45 – Session 1
11:45-12:30 – Lunch (bring your own)
12:30-2:45 – Session 2
2:45-3:00 – Break
3:00-4:00 – Session 3 (Review & Live Wrestling)

FRIDAY ONLY

9:00 –11:45 & 12:30-2:30 (2 sessions)

A Final Daily Schedule/Info Sheet will be emailed to all attendees within a week of the camp.

FEES & FORMS

\$350

WHAT DO YOU GET FOR THE PRICE?

- 5 day systematic wrestling camp run by one of the most successful wrestling clubs in the United States – Purler Wrestling. <http://www.foundationwrestling.com/>
- All paid attendees receive \$220 Purler Wrestling DVD set for FREE!
(so the camp never ends as you receive the Purler Wrestling technique series for home study & review)
- Convenient location (Kettering Fairmont HS) & Discounted Price (Kettering Wrestlers only).

Sibling Discount – contact Coach Baxter directly for sibling pricing.

Youth Wrestlers & Heavyweights – we highly recommend that you attend WITH a partner!

SEND FEES & REGISTRATION FORM TO:

CHECKS PAYABLE TO:

Fairmont Wrestling Parents

MAIL TO (OR GIVE DIRECTLY TO COACH BAXTER):

Fairmont Wrestling / Attn: Frank Baxter / 3301 Shroyer Road / Kettering, OH 45429

ONLINE PAYMENT

<https://form.jotform.us/fairmontboosters/summer-camp-form>

TIMELINE

Tuesday, May 30 (or earlier if possible!)
Payment (\$350) & Info/Waiver/Release form due!
Monday, June 26 – Friday, June 30
Camp 9:00-4:00 daily (9:00-2:30 Friday)

CONTACT

Frank Baxter – frank.baxter@ketteringschools.org / 937-470-3889

PURLER WRESTLING – PRIVATE TEAM CAMP

WRESTLER REGISTRATION FORM

KETTERING FAIRMONT / JUNE 26-30, 2017

Wrestler's Name:	Age at camp: _____ Height: _____ Approx. Weight: _____
Parents' Names: (Dad) (Mom)	*Please note: if your child is a heavyweight or a youth wrestler, you may want to bring a partner. All wrestlers are grouped according to their AGE and WEIGHTS. If no appropriate partner is registered you may be required to find one or receive a full refund.
Address: (Street Address) (City) (State) (zip)	Insurance Company: Policy #: _____ Phone #: _____
E-mail: (This is important for camp updates. These are NOT used for solicitation and will not be shared with third parties!) _____ Emergency Contact Info: Home Phone: _____ Parents' Work Phone: _____ (Dad) (Mom) Parents' Cell Phone: _____ (Dad) (Mom)	Purler Medical Release Waiver: My son/daughter has been examined by a physician in the last year and is in good health. I hereby authorize Foundation Wrestling and Purler Wrestling, Inc. to act for me, according to its best judgment in any medical emergency, and I hereby waive and release Purler Wrestling, Inc. from any liability for injuries or illness incurred by my son/daughter while attending camp. All information I have provided on this application is true and correct. Signature _____ Printed Name _____ Date _____

Parent Consent

I give my consent and approval for the participation of my child in the Fairmont Wrestling Camp. I certify that he/she is physically fit to take part in the activities. I will not hold the camp coaching staff or Kettering City Schools responsible in the event of an accident or illness.

Parent Signature

Date

Parental Permission For Emergency Treatment

In the event of illness or accident, I give my permission for emergency treatment by qualified medical personnel for my child, and I authorize the person in charge to take my child to:

(Medical Facility) _____.