

2016 Summer Wrestling Camps

The UW-La Crosse Wrestling Program would like to invite athletes to join our coaching staff and college wrestlers to attend one of our camps designed to enhance your skills on the mat. These camps are open to all wrestlers, and all skill levels. Camp staff will work with you to grow your skills and make you the best wrestler you can be!

	Excellence Camp	Elite Camp	Big Man Camp
WHO:	Entering Grades 3-12	Entering Grades 7-12	Entering Grades 9-12
WHEN:	July 6-9, 2016	July 6-9, 2016	July 6-9, 2016
COST:	\$325 Resident \$225 Commuter **If paying full amount price	\$350 Resident \$250 Commuter or to June 1, deduct \$25 for early registr	\$350 Resident \$250 Commuter ation**

If paying full amount prior to June 1, deduct \$25 for early registration

Minimum of \$50 deposit must accompany registration

DESCRIPTION:	The Excellence Camp offers	The Elite Camp is designed	The Big Man Camp is a very
	instruction for wrestlers of all	for those wrestlers that want	specific camp for wrestlers at
	skill levels. This camp provides a	to take their skills to the next	171 lb and up! A great chance
	great opportunity to learn	level, and be tested in order to	to compete against other top
	new skills and test them out!	reach their fullest potential!	big men, and learn new skills!

WHERE: All 3 camps are hosted on UWL campus. Wrestling will take place in the air-conditioned Eagle Rec Center, and all resident campers are housed in our air-conditioned Eagle Hall.

INCLUDED: Camp T-shirt, All meals for Resident Campers, Meals between sessions for Commuters

WHAT TO BRING: Pillow, sheets, blanket. Multiple sets of wrestling workout clothes. Wrestling shoes.

CAMP STAFF: All camps will be staffed by our UWL College Coaches, and UWL Wrestling Athletes

REGISTRATION: Please register in advance at: www.uwlcamps.com

OR

By filling out the registration form and sending it in.

2016 SUMMER WRESTLING CAMPS July 6-9, 2016



Registration Form

Please print clearly. We c	annot proces	ss incomple	ete registratio	ns. All inforn	natio	n req	jues	ted m	ust	be	pro	vide	d.
Participant's Full Name:													
Date of Birth:	Grade:	Age:	Weight:	T-Shirt Size:	YS	ΥM	YL	YXL	s	М	L	XL	XXL
Roommate Preference (Resident	Campers Only):											
Second Participant's Full Name:													
Date of Birth:	Grade:	Age:	Weight:	T-Shirt Size:	YS	ΥM	YL	YXL	S	М	L	XL	XXL
Roommate Preference (Resident	Campers Only):											
Address:													
City/State/Zip:													
Emergency Contact Name:													
Emergency Phone :			Emergency A	lternate Phone:									
Email (necessary for confirmation	n and camp con	mmunication):											
Special needs for participant(s):													
		Ch	eck Camp Atter	nding:									
Excellence Camp		Elite C	amp			Big M	an C	amp					
Cost: \$325 Resident \$225 Commuter		Cost: \$350 \$250	Resident Commuter		Cost			sident mmute	er				
Ages: Entering grades 3-12			g Grades 7-12				ing g	rades 9					
Minimum \$50 deposit must ac	company regis	stration. If pa	nying full amou	nt and prior to J	lune 1	, ded	uct \$	25 froi	m to	tal r	egis	stratio	on fee.
		An	nount Enclosed:	\$									
	CI	heck enclosed	d, made payable	to: UW-La Cros	se								
			Return form to osse Athletic Ca 25A Mitchell H 1725 State St a Crosse, WI 54	mps & Clinics all									
WAIVER: Registration implies per to camp. By signing this form I a liability, loss, damages, costs, or of the camp. I authorize that any cannot be reached in the event of	gree to hold hat expenses which medical, surgion	rmless and inc h are sustaine cal, diagnostic	demnify UW-La ed, incurred, or re	Crosse, their office equired arising or	cers, a ut of th	agents ne act	, and	d emplo of my c	yee lepe	s fro nder	m a nt in	ny an the c	d all ourse
Parent/Guardian Signature:													
Date:													