

# Perry Elementary Wrestling Clinic

## For Beginning Wrestlers

Grade 1-6

October 23<sup>rd</sup>-October 25<sup>th</sup> 2018



**Registration/Weigh-ins:** Weigh-ins will take place on Saturday, October 20<sup>th</sup>, 2018 in the Perry High School Wrestling Room from 11:30 a.m. to 1 p.m., late registration will be held on Tuesday, October 23<sup>rd</sup>, 2018 before the first clinical practice.

**Fees:** A registration fee of \$25.00 will be required from all participants. This fee will cover all awards, cost of the Elementary Tournament to be held at the conclusion of the clinic, and a Perry Wrestling T-shirt.

**Instructors:** Perry Wrestling staff and the Nationally Ranked Wrestling Team.

### **Areas of instructions:**

- Basic fundamentals and techniques used in high school wrestling
- Teach Cooperation and Sportsmanship
- Experience competition – team concept
- This clinic is designed for wrestlers with no more than one year experience.

**Practice Schedule & Times:** Perry High School – Main Gym

- Tuesday, Wednesday, Thursday: October 23<sup>rd</sup>-October 25<sup>th</sup> from 6-7:00 PM
- Athletes should wear shorts, t-shirts, and socks (wrestling shoes and head gear are NOT required)
- Parents are welcome to stay at each practice. Please be prompt when picking up your child

### **Elementary Tournament:**

- Saturday, October 27<sup>th</sup>, 2018 @ 8:00 AM

Cut on line

Bring this portion with you to register on **Saturday, October 20<sup>th</sup>, 2018**

Name \_\_\_\_\_ Age \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

School \_\_\_\_\_ Weight \_\_\_\_\_ Grade \_\_\_\_\_

Shirt Size:            YS      YM      YL      S      M      L      XL

In consideration of your acceptance of entry, I and my legal heirs waive and release all sponsors of this program, Perry High School and all tournament officials from any and all claims or rights to damages for injuries or losses suffered by me directly in training for, traveling to and from, and participating in this clinic and tournament.

Parent /Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_