



# Pioneer Wrestling Lock-in & Camp

## July 21-22

**Eligibility:** This camp is open to any wrestler ages 5-13. Please do not enroll your child if they have never wrestled!

**Location:** Pleasants County Park School Gymnasium Cherry Street, St. Marys, WV

**Cost:** \$40 if pre-registered, \$50 if registering day of camp (registration includes T-shirt) *\*Camp is limited to the first 50 attendees*

**What to Bring:** 2 changes of wrestling clothes, comfortable clothes to sleep in, toiletries, sleeping bag, pillow, wrestling shoes, water bottle with your child's name on it.

**Mail registration to:** Gina Houser 1320 Limestone Road, St. Marys, WV **or e-mail to:** ghouser@frontiernet.net

**Schedule:**

Friday 6:00PM-6:30PM– Camper registration/drop off  
 7:00PM-9:30PM– Evening wrestling session  
 9:30PM-11:00PM- light snack and wrestling movie  
 11:00 PM– Lights out  
 Saturday 7:00 AM– wake-up  
 7:30 AM– 8:30 AM– Breakfast  
 9:00AM-11:30– Stretching & wrestling session  
 12:00AM-1:00PM– Lunch  
 1:30PM-4:00 PM– Afternoon wrestling session  
 4:00PM– Camper pickup

**Clinicians:**

Andrew Place– Pleasants County Pioneer Coach  
 Carl Amerine– 2X NCAA All American, Ohio High School State Placer  
 Matt Place– Ohio High School State Placer

Wrestler Name: \_\_\_\_\_ Street: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Age: \_\_\_\_\_ Grade just completed: \_\_\_\_\_

T-Shirt Size: YS \_\_\_\_ YM \_\_\_\_ YL \_\_\_\_ AS \_\_\_\_ AM \_\_\_\_ AL \_\_\_\_ AXL \_\_\_\_ A2XL \_\_\_\_

Parent or Guardian Name: \_\_\_\_\_

Person to notify in case of an emergency: \_\_\_\_\_ Number: \_\_\_\_\_

Insurance Co: \_\_\_\_\_ Policy Number: \_\_\_\_\_

Food or medicine allergies: \_\_\_\_\_

We authorize our child or ward to be treated by a licensed physician, EMT, dentist if necessary while attending wrestling sessions. In submitting this entry, we waive, release, and forever discharge Pleasants County Pioneer Wrestling and all camp directors and staff, and the host facility for and from any and all injuries, losses, or other damages suffered by our child or ward or us at these wrestling sessions/camp. We acknowledge that participation in these Wrestling Sessions/Camp poses risks for our child or ward, and we represent that our child or ward is physically able to participate in these wrestling sessions/camp and has trained sufficiently to do so.

Signed: \_\_\_\_\_ (Parent or Guardian)