

**Join the Antioch Sequoit Wrestlers**

**quest toward becoming one of the best teams in the**

**State of Illinois!**

The camp is designed for hard working wrestlers wanting to improve on their skills and the mental aspects of our sport. Everyone who participates will receive a t-shirt and will have the opportunity to work alongside of All Stater’s and collegiate wrestlers.

Registrations can be mailed to Antioch Wrestling, 1133 Main Street, Antioch, IL 60002 or register at the door for $30.00 on the first day of camp. All wrestlers need to wear a t-shirt, shorts or sweat pants, and tennis shoes. Please make every effort to be on time. It is important to all of the wrestlers to enjoy every minute of practice.

For any questions, please call Wilbur Borrero, Head Wrestling Coach at 847-838-7622

**Dates: \*Monday, June 3,2019 thru Friday, June 7, 2019 –two sessions 9-11am & 5-7pm**

**Site: Antioch High School Wrestling Room (Back Entrance)**

**Cost: $50.00 if mailed or $60.00 at the door**

**Sponsored by: ACHS Wrestling**

**Clinicians: \*UNI Wrestlers & ACHS Coaches**

* **Subject to change**

Wrestler’s Name Parent Name

Address City State

Parent Email Phone

Weight Age Grade (as of 6/3/19) School Presently Attending

**T-Shirt Size (circle one): Kids Size: SM – M – L Adult Size: SM – M – L – XL – XXL**

I agree to allow my child to be treated by a licensed physician or registered nurse while attending the Camp if necessary and to assume all costs related to such treatment. I understand that there is no refund if the child decides not to return after the first day. I hereby waive my right to any and all charge back against Antioch High School District 117. I understand that the camper attending the Camp, using any camp facilities, does so at their own risk. Antioch High School District 117, it’s Athletic Department, staff, or clinicians shall not be liable for any damages arising from personal injury sustained by the camper during the camp session and so hereby fully and forever exonerate and discharge the District, wrestling coaches, and clinicians from any and all claims, demands, damages, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of the camper’s participation in the camp session and in the use of the facilities. I also grant permission for the Camp to us photographs of our child for publicity, advertising, or other commercial purposes.

Signature Date

 Parent/Guardian