

LEGENDS WRESTLING CAMP

GOTHENBURG High School

Dates & Location- June 28-30, 2022, Gothenburg High School

Registration – Mail registration to Gothenburg High School.

Questions: Contact Coach Scott 402 890 4238 or tom.scott@gosweddes.org

Or register at legendswrestlingcamp.com.

Camp Fee- \$160 per wrestler for a team of 8 or more
\$170 per wrestler for an individual

Age Requirement – Second Grade through Senior in High School.

THE CAMP IS A COMBINATION OF TECHNIQUE AND COMPETITION-there will be several incredible technicians and six high school team duals and a 6 to 8 Man Round Robin Tournament with a trophy to the winners

Technicians – Zain Retherford, Roman Bravo-Young, Dalton Jensen, and a female technician

Schedule below is for grades 7th -12th and 3rd-6th schedule will be slightly different.

June 28nd High School

9-9:30 am Introduction

9:30-11 am Zain/Dual

11-12:30 pm Roman

/Dual

12:30-1:30 Lunch

(Provided)

1:30-2:45 Ninja

Warrior

2:45-4 Dual

4:00-5:15 Dual

June 29th High School

9 -10:30am

Max/Tournament

10:30-12 Tournament

12pm-1 Lunch

(Provided)

1-2:30 pm Dalto/Tourn

2:30-4 Tournament

June 30th High School

9-10:15 am Dual

10:15-11:30pm Dual

11:30-12:45 pm Dual

12:45 Pizza N Go

(Provided)

The Second-sixth graders will be done at 12 pm on June 30th

Camp will provide lunches and awards for the tournament.

technical advice from legendary wrestlers Roman Bravo-Young and Zain Retherford. Lunches, medal, and camp t-shirt are also included in the price.

Camp Registration information

Name _____

Weight _____ Grade (for 2022-2023 school year) _____ Level (1-5) _____ Gender (M/F) _____

Numbering for Levels 1-5

- 1 is a beginning wrestler with very little experience
- 2 is someone who won matches but lost more then they won
- 3 is someone who won more matches then they lost but did NOT qualify for the state tournament
- 4 is a state qualifier
- 5 is a state placer

High School Team _____

High School Coach _____

T-Shirt Size: YS YM YL S M L XL XXL

Parent(s) names _____

Parent's Cell # _____

Parent's Email address _____

Waiver and Release Form / Medical Information

I fully understand that the staff are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Gothenburg Wrestling staff to render temporary first aid to my child or children in the event of any injury or illness, and if deemed necessary by the Gothenburg Wrestling staff to call our doctor and to seek medical help, including transportation by a Gothenburg Wrestling staff member and/or its representatives, whether paid or volunteer, to any health care facility or hospital, or the calling of an ambulance for said child should the Gothenburg staff deem this to be necessary.

In consideration of your acceptance of this entry, I intend to be legally bound hereby for myself, my heirs, executors and administrators waive and release Gothenburg wrestling staff, Zain Retherford and Roman Bravo-Young, THEIR AGENTS, REPRESENTATIVES, COACHES, VOLUNTEERS, FROM ANY AND ALL CLAIMS OR RIGHTS TO DAMAGE FOR INJURIES OR LOSSES SUFFERED BY ME DIRECTLY OR INDIRECTLY IN TRAINING OR TRAVELING TO OR FROM OR COMPETING IN, OR ATTENDING the camp.

Parent or Guardian Signature _____ **Date:** ____ / ____ / ____

Reminder: Wrestlers need to have gear to wrestle in all three days but also on Day 2 (June 24th) 3rd-6th graders will be swimming.

Due to space, we will be limiting the number of participants to 425 wrestlers that are grades 7-12 and 75 wrestlers that are grades 3-6. It will be on a first come, first serve basis early registration by mail with payment will guarantee a spot in the camp.

Please return form with payment to:

Gothenburg High School Wrestling
1322 Avenue I
Gothenburg, NE 69138