

Davis Summer Wrestling Camp

June 6-9, 2022: 6-8 pm at Davis High School

(Bring work-out clothes and clean shoes)

Athlete's Name _____

Grade in School _____ School they Attend _____

Insurance Information _____

Parent's Name _____

Parent's Cell Number _____ (used for emergencies)

Parent's Email _____ (used for information)

Camp Cost:

\$40

\$30 for each additional sibling!

Paid _____

Not Paid _____

I hereby consent to the above student participating in the Davis Wrestling Club. I understand that all activities are voluntary and that my child does not have to participate. I recognize the risk of possible injury is inherent in all sports and by signing, I voluntarily accept and assume the risk of injury to my child. I will not hold Davis High School or Davis School District responsible for any injury that may occur. I agree to provide my child with health insurance.

Parent Signature _____ Date _____

Funds are used for Coaches Stipends, updating wrestling equipment, and in managing wrestling fees and costs, (i.e. mat tape, mat cleaner, tournament costs, travel fees.)