

CAMAS WRESTLING CLUB FOLKSTYLE



All levels welcome!

For all students that have a desire to wrestle & compete. Represent the Camas Wrestling Club throughout SW WA & NW OR regions. USAW cards are required in order to compete in tournaments.

- Who:** Males & Females, Kindergarten - 12th Grade
- Dates:** November 25 - March 29
- Days:** Grade K-3: T/TH, 6:00-7:00 PM, 1105-19, \$65
Grade 4-12, M/W, 6:00-7:30 PM, and TH 7:00-8:00 PM, 1150-19, \$95
- Location:** Camas High School Wrestling Room (*enter building through the back door*)
- Coaches:** Zane Freschette (State Placer & Community Police Officer)
Michael Nguyen (2 X WA State Champion, ASU Graduate & Wrestler)
Kenji Yamashita (WA State Finalist, Simon Fraser Graduate & Wrestler)
Max Grimes (Previous Camas Varsity Wrestler & WSU Graduate)

Register online at www.CamasCommunityEd.org or fill out the form below.

Cut Here ✂ _____

360-833-5544	Camas Community Ed., 4600 NE Garfield St., Camas, WA 98607	www.CamasCommunityEd.org
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Student's Name: _____

Parent's Name: _____

Phone: _____ Phone: _____

Email Address: _____

School: _____ Grade: _____

Please fill out T-shirt size or you will not receive one: YS YM YL AXS AS AM AL AXL

Does your child have any medical conditions or allergies of which staff should be aware? Yes No

If yes, please explain: _____

50Code	Class Title	Fee
	Camas Wrestling Club - Folkstyle	\$
		\$

Total Enclosed: \$ _____

This student has my permission to participate in this CCE activity. I understand the Camas Community Education program does not provide insurance. I certify that my child is physically and mentally able to participate in this activity. I will communicate my child's potential medical/medication needs with staff. I, intending to be legally bound, waive and release my rights and claims for damages I may accrue against any and all sponsors of this activity. I understand my child's image may be used for promotional purposes for CCE and/or the CSD.

Parent/Guardian Signature: _____ Date: _____