



Purler Wrestling Academy is coming to Idaho Falls June 11-13

\$220 in FREE Purler Wrestling DVDss to the FIRST 30 KIDS TO REGISTER

DON'T DELAY! SIGN UP NOW AND DON'T MISS OUT!

Purler Wrestling Academy: USA Wrestling National Team Champions // 4X Tulsa National Champions // Over 2,000 State Medalists since '99.

Dates & Location: June 11 - 13 at Idaho Falls High School

Session Times: 9:00 – 11:45 / Lunch / 12:30 – 2:45 / Break / 3:00-4:00 **Lunch is included**

Registration & Questions: Contact **Coach Jody Webb** (208) 602-9133 jodywebb84@gmail.com

Training Fee: \$200 Make checks payable to **Hillcrest Outlaws: 1986 Hoopes Ave, Idaho Falls ID 83404**

Age Requirement: Must be at least 8 years of age; Average age of wrestlers is usually 11-17

This is a Purler Wrestling Academy SYSTEM camp offered by Coach Webb, therefore, please direct ALL questions to Coach Webb.

Free DVDs to first 30 kids to register. Camp space is limited to 50 wrestlers!

Camp Registration information

Name _____ Age _____

Parent(s) names _____ Emergency # _____

Email address _____

Waiver and Release Form / Medical Information

I fully understand that the Purler Wrestling, Inc. staff are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Purler Wrestling, Inc. 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 Purler Wrestling, Inc. staff to call our doctor and to seek medical help, including transportation by a Purler Wrestling, Inc. 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 Purler Wrestling, Inc. 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 PURLER WRESTLING, INC, 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 training camp.

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

Camp Schedule

Monday, June 11th

9:00 – 11:45 Phase 1 Technique
11:45 – 12:30 Lunch (provided)
12:30 – 2:45 Phase 1 Technique
3:00 – 4:00 Review and live wrestling

Tuesday, June 12th

9:00 – 11:45 Phase 2 Technique
11:45 – 12:30 Lunch (provided)
12:30 – 2:45 Phase 2 Technique
3:00 – 4:00 Review and live wrestling

Wednesday, June 13th

9:00 – 11:45 Leg Riding Technique
11:45 – 12:30 Lunch (provided)
12:30 – 2:45 Leg Riding Technique
3:00 – 4:00 Review and live wrestling

5:00 – 7:00 Special live/drill session open to ALL parents and coaches!
**Come see how much your wrestler has improved!!!!*