

14<sup>th</sup> Annual

Presented By:

# Winter Break Training Camps



## BENEFITS OF A TRAINING CAMP:

Come and learn at a camp where there are limited numbers of wrestlers allowed in (more attention), taught a PROVEN system that will work at all levels of wrestling, constantly drilled over moves shown so you LEARN them and put in live situations to practice/learn the moves taught.

### Camp Dates:

Dec 26<sup>th</sup>: Takedown Training Camp

Dec 27<sup>th</sup>: Escapes & Reversals Camp

Dec 28<sup>th</sup>: Tilts & Turns Camp

Dec: 31<sup>st</sup> – Jan 1<sup>st</sup>: **“Champ Camp” – spend the night at Wesley Woods!**

Location: Dec 26-28: Prairieview Wrestling Room (Waukee)

Dec 31-Jan 1: Wesley Woods, 10896 Nixon St. Indianola, IA 50125

Cost: \$40 per camp (Dec. 26-28), \$125 for Dec. 31<sup>st</sup> camp

### Schedule For Camps:

- 9am-Noon or 1:30-4:30pm (pick 1) for Dec. 26-28 camps

- Dec. 31<sup>st</sup>: check in 1:30pm & check out 3:00pm on Jan 1<sup>st</sup>! \*This is a spend the night camp at Wesley Woods (Indianola, IA)

Register: Online through website or mail form!

Grades: K-12<sup>th</sup> (Limited to 40 wrestlers per camp time)

-Dec 31<sup>st</sup> Camp open to 2<sup>nd</sup>-12<sup>th</sup> grade (under 2<sup>nd</sup> needs approval)

Outline: Technique, drilling, LIVE (situations & wrestling)

HAWC Merchandise will be available for purchase!

*\*Please note: Your spot in camp is not guaranteed until I receive your camp form and full payment! NO REFUNDS...only camp credit!\**

**Please Note:** Drive to back of school (north side) and enter through blue doors. No Filming! No parents on mat during camps!

### Please Circle Camp(s) and Time(s) Attending:

Takedown (Dec. 26<sup>th</sup>)

9-Noon or 1:30-4:30

Escapes & Reversals (Dec. 27<sup>th</sup>)

9-Noon or 1:30-4:30

Tilts & Turns (Dec. 28<sup>th</sup>)

9-Noon or 1:30-4:30

CHAMP Camp (Dec 31<sup>st</sup>)

\*Spend the night at Wesley Woods\*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Grade: \_\_\_\_\_

Weight: \_\_\_\_\_

I certify my child has been cleared by a physician and hereby give my permission for any and all activities involved in the wrestling training camp. I further waive any legal action against High Altitude Wrestling Club, Chad Tunink, High Altitude Wrestling Camp Staff, Waukee Community School District, Prairieview School, Wesley Woods Camp and Retreat Center, and its employees for injuries my child may incur.

Parent's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**MAIL BOTTOM HALF TO:** High Altitude Wrestling Club, 601 SE 13<sup>th</sup> Street, Grimes, IA 50111

**CONTACT INFO:** Chad Tunink 641-757-1287 (c) [chad@highaltitudewrestling.com](mailto:chad@highaltitudewrestling.com)

**Facebook:** highaltitudewrestling **Twitter:** HAWrestling **Instagram:** high\_altitude\_wrestling **Nutrition:** www.4foreverfit.com

**For More Information On My Club, Camps and/or Merchandise:** [www.highaltitudewrestling.com](http://www.highaltitudewrestling.com)