

# 2010 12<sup>th</sup> Annual East Cobb Wrestling Camp

**Dates and Times:**

May 25<sup>th</sup> Tue 3:00pm-7:00pm

May 26<sup>th</sup> Wed 3:00pm-7:00pm

May 27<sup>th</sup> Thu 10:00am-2:00pm

May 28<sup>th</sup> Fri 10:00am-2:00pm

**Cost: \$125 postmarked by May 18<sup>th</sup>  
(Make check out to "East Cobb Wrestling Camp")**

**Mail checks to:**

Lassiter High School

ECW Camp

C/O Steve Day

2601 Shallowford Rd

Marietta, GA 30066

**Location:**

Lassiter High School

Lassiter High School Wrestling Gym

2601 Shallowford Rd

Marietta, GA 30066

**Camp Directors: Steve Day – Lassiter / Jim Haskin – Pope**

**Instructors: Local State Champs and Placers**

**Plus several other Cobb County Head Coaches and Assistants.**

**Questions: Pope 770-578-7926 / Lassiter 678-494-7881**

**Send the registration form below with the payment.**

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**Name: (Print) \_\_\_\_\_ Age: \_\_\_\_\_ Weight: \_\_\_\_\_**

**School attending 2009-2010 \_\_\_\_\_ Gr \_\_\_\_\_ HS district you live in \_\_\_\_\_**

**Shirt Size (CIRCLE) Youth: S M L XL Adult: S M L XL XXL**

We authorize our child or ward to be treated by a licensed physician, EMT, dentist, physicians assistant, registered nurse, or athletic trainer, if necessary, while attending camp. In submitting this entry, we waive, release, and forever discharge East Cobb Wrestling Camp directors and staff, and the host facility for and from any and all injuries, losses, or other damages suffered by our child or ward or us at this camp, while traveling to and from this camp, or while participating in this camp. We agree to indemnify and hold Camp, and all camp directors and staff, and the host facility, harmless from and against any and all claims or demands, including reasonable attorneys' fees, made by any third party, to include our child or ward, due to or arising out of our child or ward's participation in this camp. We acknowledge that participation in this camp poses risks for our child or ward, and we represent that our child or ward is physically able to participate in this camp, and has trained sufficiently to do so.

**Signature of Parent or Guardian \_\_\_\_\_ Insurance Co. \_\_\_\_\_ Policy# \_\_\_\_\_**