

Calvary Chapel Wrestling Camp

Session 1: Aug. 9–Aug. 13 2010
Session 2: Aug. 16–AUG. 20 2010

Cost is \$350.00 per session

This is an overnight camp which includes 3 Wrestling sessions a day, 3 meals a day, and snacks

Calvary Chapel High School
3800 S. Fairview
Santa Ana, CA

Camp Space is limited

LAST DAY TO REGISTER IS FRIDAY, JULY. 23, 2010

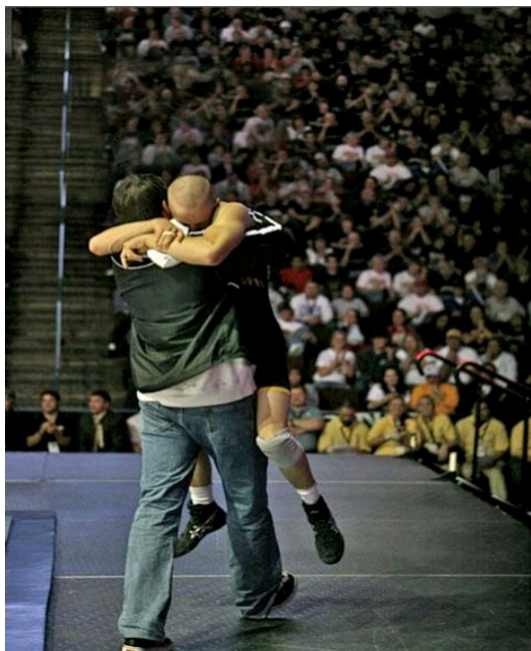
USA CARD IS REQUIRED

CALVARY CHAPEL COACHING STAFF:

- ARSEN ALEKSANYAN
- JOSHUA HOLIDAY
- JACOB HARMAN
- STEVE ESPARZA

CAMP COUNSELORS:

- JOE WILLIAMS-Michigan State University
- DAVID JUARUEI-University of West Virginia
- PATRICK ALEKSANYAN-University of Nebraska
- JUSTIN PAULSEN-Stanford University
- JAYSON NESS-University of Minnesota.
- JASON LARA - Oregon State University



Please make checks payable to:
SONS OF THUNDER

Mail checks and forms to:
Arsen Aleksanyan
2701 W. Orion Apt. # 1
Santa Ana, CA 92704

For more information and to reserve your spot contact:

arsenaa@hotmail.com

CALVARY CHAPEL WRESTLING CAMP

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Session 2: Aug. 16–Aug. 20

Session(s) attending 1 2 (please circle)

_____ Male _____ Female (as commuter only)

Name _____

Home Address _____

Home Phone _____ Cell Phone _____ Work/Emergency phone _____

Email _____ Date of Birth _____ Age _____ Weight _____ Height _____

School _____ Grade Next Fall _____

Experience Level: Varsity _____ JV _____ Frosh _____ Years of Experience _____

In the event of an Emergency, please contact:

Name _____ Phone (s) _____ Relation _____

Name _____ Phone (s) _____ Relation _____

Regular Physician _____ Phone (s) _____ Location _____

Parent Authorization and Emergency Contact Information

WRESTLERS ARE NOT ALLOWED TO WRESTLE WITHOUT THIS FORM BEING COMPLETED

The health of the person described above is excellent and has my permission to engage in all prescribed Camp activities, except as noted by my examining physician or me.

Health Notes:

In the event I cannot be reached in an EMERGENCY, I hereby give permission to the physician selected by the Camp Director or Trainer to hospitalize, secure proper treatment for, to order injection, anesthesia, or surgery for my child named above.

Signature of Parent or Legal Guardian

Date

Please list any medicine the wrestler may be allergic to, or any camp activity he/she should not participate in:

Physical Exam: For the health safety of the participant, it is strongly recommended that wrestlers have a physical examination within the year prior to attending camp.

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For more info please contact Coach Arsen at:

arsenaa@hotmail.com

1 (714) 865-1483

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Liability release and assumption of risk agreement

Wrestler Name: _____

USA CARD NUMBER (REQUIRED) _____

Hospitals and doctors do require insurance or payment incase of treatment. Please list YOUR insurance company and policy number below:

Medical Insurance Company: _____ POLICY # _____

In consideration of being allowed to participate in any way in the Calvary Chapel Freestyle Camp, the undersigned:

I understand that my child named above will be participating in vigorous activities, which present potential risks of injury. On behalf of my minor child and all those related to my minor child, I hereby agree, that we shall assume the risk of any injuries that may result from my child's participation in the Calvary Chapel Freestyle Wrestling Camp.

Agrees prior to participating he/she will inspect the facilities and equipment to be used, and if he/she believes anything to be unsafe, he/she will immediately advise coach or supervisor of such condition (s) and refuse to participate.

Acknowledge and fully understand that the participant will be engaging in activities that involve risk of serious injury, including permanent disability and death, and severe social and economic losses which might result not only from their own actions, inaction, or negligence or others, the rules of play, or the condition of the premises of any equipment used. Further that there may be other risks not known to or is not reasonably foreseen at the time.

Assume all the foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death.

Release, waive, discharge, and covenant not to sue Calvary Chapel Freestyle Wrestling Camp, its affiliated clubs, respective administrators, directors, agents, coaches, and other employees of the organization, other participants, sponsoring agencies, sponsors, advertisers, and if applicable owners and lessors of premised used to conduct the event, all of which are hereinafter referred to as "released" included Calvary Chapel High School and Calvary Chapel Church from demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of the released or otherwise.

I have read the above waiver and release, and I understand that I have signed it voluntarily.

Signature of Parent or Legal Guardian

Date

Calvary Chapel wrestling camp 2010
arsenaa@hotmail.com

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Packing List

Things to bring to camp:

Please bring your own towels and lightweight sleeping bag

Suggested Work- Out Items

Wrestling shoes, running shoes, shorts,

Practice t-shirts, athletic supporters, mouth protector, kneepads and headgear.

Note: Bring workout clothing for the entire camp stay- there are no laundry facilities

Suggested Personal Items

Bible, Lightweight sleeping bag, towels,

Antibacterial soap, shampoo, shirts, swim trunks,

Shorts, jeans, sweatshirt, street/tennis shoes, toothbrush,

Comb, locker lock, deodorant, sun block, Chap Stick,

Spending money for activities (possible movie or trip to the beach).

~Camp rules will be discussed prior to first session of wrestling on opening day~

Please mail completed forms and payment to:

Sons of Thunder/Arsen Aleksanyan

2701 W. Orion Apt. # 1

Santa Ana, CA 92704

LAST DAY TO REGISTER IS FRIDAY July. 23, 2010

Camp Space is Limited

Email Arsenaa@hotmail.com to reserve a spot today!

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Schedule

Tentative Schedule (Opening Day)

1:00 p.m.	Registration
3:30–5:00	Wrestling
6:00–7:00	Dinner
7:30–9:00	Wrestling
10:30	Lights Out

Daily

8:00–9:00	Breakfast
10:00–12:00	Wrestling
12:30–1:30	Lunch
3:30–5:30	Wrestling
6:00–7:00	Dinner
7:30–9:00	Wrestling
10:30	Lights Out

Closing Day

8:00–9:00	Breakfast
10:00–12:00	Wrestling
12:00	Camp Concludes

**Orientation/Registration:
In the courtyard**

**Session 1 ~ Aug. 9rd @
1p.m.–2p.m.**

**Session 2 ~ Aug. 16th @
1p.m.–2p.m.**

USA card required
“Eat, Sleep & Wrestle!”

Please mail completed forms and payment to:

Sons of Thunder/Arsen Aleksanyan
2707 W. Orion Apt. # 2
Santa Ana, CA 92704

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