

# Waunakee Wrestling K-6 Youth Wrestling Camp

## June 26<sup>th</sup> – 28<sup>th</sup> 2018

**Welcome:** The three day camp will focus on developing all wrestling skills. Wrestlers will be introduced to basic and simple drills that will help them to become a better wrestler. There will be an emphasis on having fun and some live wrestling will take place. The camp will be split into two groups if necessary based on age and ability.

**Schedule:** (K – 6<sup>th</sup> Grade) Check in Tuesday from 12:45 – 1:00  
Camp will be on Tuesday, Wednesday and Thursday from 1:00 – 3:00 pm in the High School Wrestling Room.

**Staff:** Waunakee High School Wrestling Coaches: Mark Natzke, Dave Burgard along with various current high school wrestlers and possibly a few members from the UW-Badger Wrestling Team.

**Equipment needed:** Athletic clothes (shorts and t-shirt) and wrestling shoes.

**Cost:** Early Registration: \$40 Early Registration before June 8<sup>th</sup>. Must register early to receive a T-shirt.  
Late Registration: \$50 available until the start of camp.

**Contact:** Questions contact Mark Natzke at [marknatzke@waunakee.k12.wi.us](mailto:marknatzke@waunakee.k12.wi.us)

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**Detach here**

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Waunakee Youth Wrestling Camp Application June 26<sup>th</sup> – 28<sup>th</sup>. **(k – 6<sup>th</sup> grade)**

Please Print. Make checks payable to Waunakee Wrestling. Mail with full payment and parent's signature to Mark Natzke Waunakee High School 301 Community Drive, Waunakee WI 53597

Camper's Name: \_\_\_\_\_ Parents Name: \_\_\_\_\_

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

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

Daytime Phone Number: \_\_\_\_\_ Emergency Phone Number: \_\_\_\_\_

Date Sent: \_\_\_\_\_ Amount Paid (circle): \$40 \$50

T-Shirt Size:	Youth	Youth	Youth	Adult	Adult	Adult	Adult
	Small	Med	Large	small	med	large	X-Large

Grade Entering in the fall: \_\_\_\_\_ Approximate weight: \_\_\_\_\_

Parent/Guardian Statement: I herby authorize the directors of the Waunakee Youth Wrestling Camp to act according to their best judgment in any emergency requiring medical attention. I herby release and waive the WHS staff from any and all liability for any injury or illness. I have no knowledge of any physical impairment of the camper.

Parents Signature: \_\_\_\_\_