

Great Bend High School Wrestling

Grapple on the Gridiron

June 26th & 27th, 2020

Great Bend High School Wrestling Team will be hosting our 3rd annual summer wrestling dual camp. Wrestlers should be composed of incoming 7th-12th grade students. There will be no official weight classes. The focus of the camp is mat time and not cutting weight. Coaches will match up with each other's teams based on weight and/or skill to get the best matchups possible. Wrestling will begin Friday (6/26/20) morning and will continue through Saturday (6/27/20). Teams can camp out Thursday and Friday night on campus or I can provide you with a list of hotels in our area.

Date: 6/26/20 (Friday) and 6/27/20 (Saturday).

Time: 9:30 am and 9:00 AM

Weigh In: Thursday 6/25 PER HOMESITE WITH COACH by 8 pm **OR** from 5:30-9 @ PAC Center

Where: Great Bend High School

Cost: \$500 per team of 15+ or \$35 per individual. Partial teams will be combined to make as many full teams as possible.

Payment: Make Checks Payable to Panther Wrestling (to secure a spot send half as deposit)

Required:

Athletes must fill out medical release form in order to compete.

Accommodations:

Teams must obtain their own accommodations. Teams may camp out on the practice football field or in the gym pending weather. Locker rooms/bathrooms will remain open for teams staying at the school. Concessions will be sold through the entire camp.

Contact Information:

Nathan Broeckelman

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C# 785-871-7981

Grapple on the Gridiron Medical Release Form

**This form must be signed and must not be faxed or
emailed.**

I approve of my students attendance to compete in the Grapple on the Gridiron and certify that he/she is in good health, and is able to perform any and all wrestling activities. If Medical attention is required for illness or injury while attending the Grapple on the Gridiron, I hereby give permission for emergency care. I also hereby release Great Bend High School Wrestling, Coaches, Wrestling Staff, Great Bend Kids Wrestling Club, and Great Bend High School of any and all liability.

Athletes Name:

Parent/ Guardian Signature:

Athlete Participating Health Insurance:

Medical Conditions that Grapple on the Gridiron should be aware of:
