

Southeast Wrestling Camp

DIRECTOR - TOM LOOBY, BHS Varsity Wrestling Coach SPONSORED BY SOUTHEAST RECREATION

This camp will touch upon a variety of wrestling techniques and styles. We will concentrate on basic moves which will lay the foundation for these athletes to become successful competitors. Tom Looby is the head wrestling coach and a special education teacher at BHS. He has been coaching the Varsity Wrestling team for the past 12 seasons. There will be Brewster wrestlers and alumni working at the camp.

DATES: July 15, 16, 17, 18
TIME: 8:00 am to 12:00 pm
LOCATION: BHS Wrestling Room
GRADES: Boys entering 1st thru 8th
FEE: \$150 (Payable to Town of Southeast)



ACTIVITIES REGISTRATION FORM

PROGRAM: _____ GRADE: _____

NAME: _____ MALE: _____ FEMALE: _____

ADDRESS: _____

CITY: _____ ZIP CODE: _____

PHONE: (HOME) _____ (WORK) _____ (CELL) _____

EMERGENCY CONTACT: _____ PHONE: _____

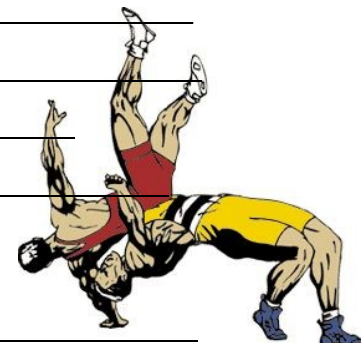
FEE (non-refundable) : CREDIT CARD: _____ CHECK: _____ CASH: _____

CREDIT CARD INFO (No Amex): Number" _____

Beginning September 2017 all programs will be subject to a 2% processing fee for all credit card payments.

Expiration date: _____ Security Code: _____

E-MAIL ADDRESS: _____



_____ has my permission to participate in the Southeast Recreation program. I assume all risks and hazards incidental to such participation including transportation to and from activities. I do hereby waive, release, absolve, indemnify and agree to hold harmless the sponsors and coaches for any claim arising out of an injury to my child. I also understand that it is my responsibility to notify the instructor of any MEDICAL/PHYSICAL condition that could limit my child's participation or that requires special attention.

PARENT/GUARDIAN SIGNATURE: _____ DATE: _____

Mail or drop off at: Town of Southeast Recreation Department
1 Main Street / Brewster, NY 10509 / phone: (845)279-3915 / (845) 279-3137
E-Mail: recreation@southeast-ny.gov Website: www.southeast-ny.gov

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