



EAST ISLIP WRESTLING

SUMMER CAMP 2018

Camp Dates & Times:

Monday, July 30th - Thursday, Aug. 2nd

9:00 AM - 12:00 PM

Location -East Islip High School Wrestling Room

All Wrestlers going into 3rd - 12th Grade

Cost- \$100 Resident -\$125 – Non-Resident

Make checks payable to: East Islip Kid Wrestling

**Send Form and Check to: 36 Darcy Circle
Islip, NY 11751**

Contact Name: Mike Longobardi - Mlongoba@eischools.org

**Camp Counselors – Rohan Murphy - Jesse Dellavecchia – Dennis Ferro –
KC Beach (Islip Head Coach) – Mike Longobardi (East Islip Head Coach)**

Registration Deadline – July 13th to guarantee a tee-shirt

Shirt Size (circle one) - Adult- S M L XL XXL Youth - M L

NAME _____ Age _____ Weight _____

ADDRESS _____

CELL PHONE # _____ Email Address _____

Parent/Guardian Medical Waiver and Release Form

You agree that you are aware that the child named below will be engaging in physical exercise involving various sports, coordination events and general fitness training which could cause injury, illness or various skin infections. You understand that the child is voluntarily participating in these activities and is assuming all risks of injury, illness or skin infection that may result from engaging in any practice, exercise or sport related event including tripping, slipping, falling, colliding with another individual or object on or off the club premises. You hereby agree to waive any claims or rights that you might otherwise have to sue the club, our employees, owners, officers, or agents for any injury, illness or skin infection that may occur. You understand that we will make no evaluation or recommendation as to whether or not the child is capable or deemed physically fit to engage in any activity. If the child has any physical or mental condition that may impair his or her ability to engage in any of the club activities, practices or exercises, it is your responsibility to obtain a physician's release statement. It is recommended you consult a physician prior to your child participating in any practice, physical exercise or club activity.

PARENT / GUARDIAN SIGNATURE: _____ DATE: _____