



## **SKYRIDGE HIGH SCHOOL WRESTLING CAMP** **Wednesday-Friday, June 22<sup>nd</sup> – 24<sup>th</sup>**

Kids Camp (grades K-6): 9:00a.m. - 11:30 a.m.

Junior High/High School Camp (grades 7-12): 9:00a.m - 11:30 a.m. AND 1:00 - 3:30 p.m.

Kids Camp: We will focus on basic technique and a fun learning environment to practice these skills.

Junior High/High School Camp: This camp is for students wanting to develop strong technique while learning what it takes to be a successful wrestler. We will also work on lifting technique, mental toughness, and conditioning and nutrition. There will also be live wrestling sessions.

Cost of the camp:

Kids Camp: \$ 55

Junior High/High School Camp: \$ 65

Location: Lehi Junior High Cafeteria

Featured Clinicians:

Lyle Mangum -- Head Wrestling Coach at Skyridge High School

Blake Mangum – 4 time Utah High School Placer, 3 time All-American, Varsity wrestler at Oklahoma University and UVU

Ryker Vandertoolen, Braxton Vandertoolen, and Jordan Hart

Payment can be made at [myschoolfees.com](http://myschoolfees.com) or you can register at the door on June 22<sup>nd</sup> from 8:30am - 9:00a.m.

Questions? Contact Lyle Mangum @ 801-400-0185 or [lmangum@alpinedistrict.org](mailto:lmangum@alpinedistrict.org)

Participants should wear shorts and a shirt and have wrestling shoes if possible. Each wrestler will receive a camp T-shirt and kids camp attendees will receive wrestling medals for their participation.

# Skyridge High School Wrestling Camp APPLICATION

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Wrestler's email address

\_\_\_\_\_  
Parent's email address

\_\_\_\_\_/\_\_\_\_\_  
Age/Grade      Current Weight

YM YL XS S M L XL XXL shirt size  
Please Circle one

## Parent Release

I hereby release Skyridge High School and Alpine School District and the Skyridge wrestling camp, and the coaches from responsibility for any injuries sustained by my wrestler during the Skyridge wrestling camp. By undersigning, I will accept all responsibility for any claims on my wrestler should hospitalization be necessary during the dates indicated in the wrestling brochure while my wrestler is registered at the Skyridge Wrestling camp. In addition Skyridge High School and Alpine School District will not be held responsible for any payments on such occasion. To the best of my knowledge my wrestler is physically fit to participate in the Skyridge Wrestling Camp.

Signature of Parent/Guardian \_\_\_\_\_

Print Name of Parent/Guardian \_\_\_\_\_

Print Name of Wrestler \_\_\_\_\_

Emergency Phone Number \_\_\_\_\_