GCMSF YOUTH WRESTLING CAMP

2017 Since 2010-11 **Regional Champions** (2013, 2014, 2015) Date: June 12 – June 16 2015 IHSA Dual Team State 4th place Who: students entering K – 6 grades in the fall of 2017 21 State Qualifiers Time: 8:00am – 9:30am 8 All-State Wrestlers Location: GCMS Elementary School Fee: \$35.00 (includes camp T-shirt) Take \$10.00 off for each additional child of the same family **Registration:** Mail entry form in or sign up the first day of camp (30 min prior to start) Mailing address: GCMS High School, 815 N. Church, Gibson City, IL 60936 Make checks payable to GCMSF WRESTLING **Important Rule for GCMS Sport Camps** Each year campers will need to provide proof of medical insurance or sign a release waiver to attend camp. Please provide a photo copy of your insurance card. If you have guestions please contact Josh Carter (217-853-6037) Name _____ Grade (2017-18) _____ Address _____ Phone _____ Shirt size: YS YM YL AS AM AL XL XXL E-mail Amount Enclosed \$ I desire to enroll my child in the 2017 Falcon Wrestling Camp at GCMS High School. I understand that neither Community Unit District #5 nor the Directors will assume responsibility for accidents sustained at the camp or as a result of travel to and from camp. (Parent/Guardian) _____ Date _____ Signed __