

Nebraska Christian Wrestling Camp

*Featuring Jaydon Elge
2x State Champion
South Dakota State Commit*

June 2-3

Session 1-9:00-11:30

Session2- 2:00-4:30

Clinic Fee: \$30 (includes T-shirt)

T-shirt orders will be taken at the camp and mailed to you

Grades 3-12

Make Checks Payable To: Terry Elge

Mail To:

Coach Terry Elge
1206 W 18th Rd
Aurora, NE 68818

Name: _____ Grade: _____ Age: _____

Address: _____ Phone: _____

T-shirt Size YS YM YL AS AM AL XL XXL

The following statement must be signed by a parent or guardian.

We (or I) hereby request that you accept this application of enrollment of _____ in the Nebraska Christian Schools Camp on June 2-3, In consideration of your acceptance of the application we will (or I, whether one or more) hereby release Nebraska Christian Schools and any and all of its employees or agents from all claims on account of injuries which may be sustained by our (or my) son while attending the Nebraska Christian Camp in Central City, NE; and we (or I) agree to indemnify the Nebraska Christian schools and any and all of its employees or agents any claim which may hereafter be presented by our (or my) minor son as a result of such injury.

Parent/ Guardian: _____ Date: _____ / _____ / _____