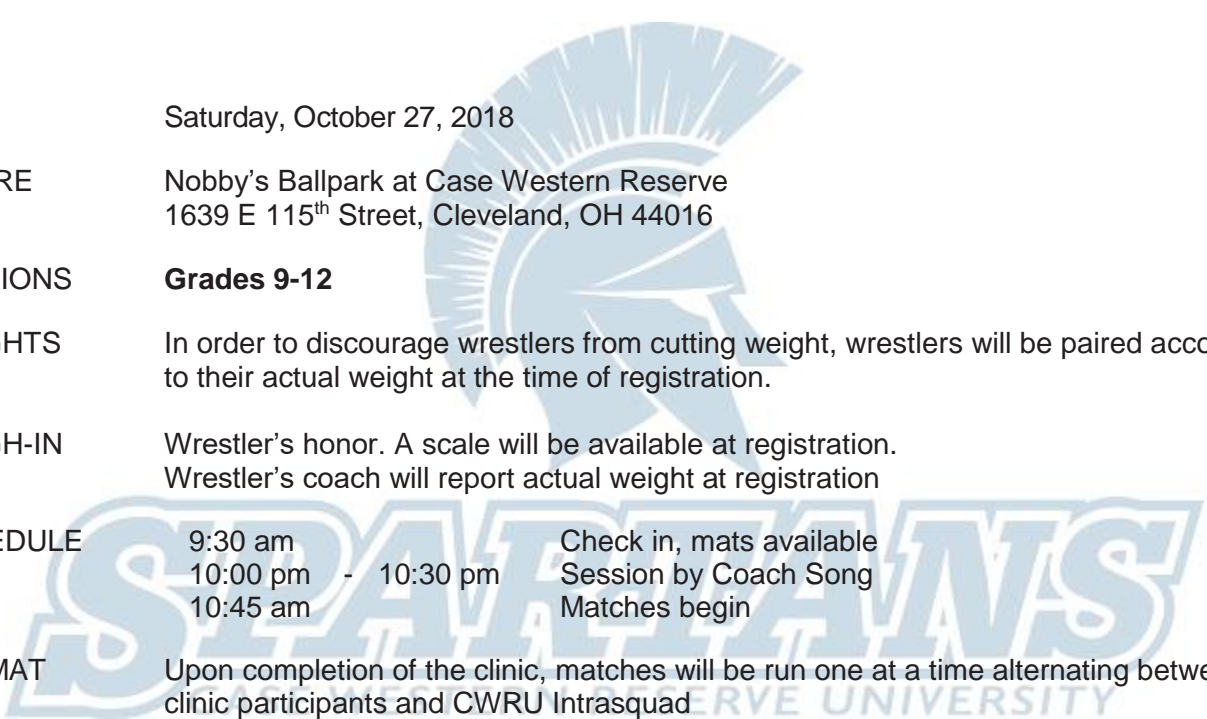


# 2018 CWRU Wrestling Outdoor Preview Clinic



DATE	Saturday, October 27, 2018
WHERE	Nobby's Ballpark at Case Western Reserve 1639 E 115 <sup>th</sup> Street, Cleveland, OH 44016
DIVISIONS	<b>Grades 9-12</b>
WEIGHTS	In order to discourage wrestlers from cutting weight, wrestlers will be paired according to their actual weight at the time of registration.
WEIGH-IN	Wrestler's honor. A scale will be available at registration. Wrestler's coach will report actual weight at registration
SCHEDULE	9:30 am                      Check in, mats available 10:00 pm - 10:30 pm      Session by Coach Song 10:45 am                      Matches begin
FORMAT	Upon completion of the clinic, matches will be run one at a time alternating between clinic participants and CWRU Intrasquad
RULES	Modified college rules will be followed Periods will be 2-2-2 for clinic participants
REGISTRATION	Limited space available. E-mail registration to: <a href="mailto:das274@case.edu">das274@case.edu</a> <b>Walk ins will not be accepted</b>
ENTRY FEE	This event is free
PARKING	Garage 46, 1656 E 118 <sup>th</sup> Street Cleveland, OH 44106 Event rate is \$7 for all day.
ADDITIONAL INFORMATION	This is event will be held outdoors weather permitting on the infield of the baseball diamond at Nobby's Ballpark. All spectators must observe from the stands. A contingency to move the event indoors due to inclement weather is in place. Spectators Admission: Free

# 2018 CWRU Wrestling Outdoor Preview Clinic

---

## Registration

Name \_\_\_\_\_ Grade \_\_\_\_\_ Weight \_\_\_\_\_

Date of Birth \_\_\_\_\_ Cell \_\_\_\_\_

School / Club \_\_\_\_\_ E-mail \_\_\_\_\_

Coach or Parent Name, Cell, E-mail:  
\_\_\_\_\_

## Parental Consent

I hereby request that you accept this application for enrollment in the CWRU Wrestling Preview Clinic. In consideration of your acceptance of this application, I hereby release Case Western Reserve University, CWRU Wrestling, event personnel, and all other associated parties from all claims on account of injuries which may be sustained by my child while attending the event.

Parent or guardian (print and sign) \_\_\_\_\_

Date \_\_\_\_\_