

2021 **Castleton** Wrestling Camp Tournament

All skill levels are encouraged to attend. This is an individual tournament that will include **Castleton** Wrestling Camp Campers and those who would like to enter into the tournament the last day of wrestling camp. Walk-ins also welcome.

Date: Wednesday, July 28<sup>th</sup>, 2021 Location; Glenbrook Gymnasium, 190 University Drive **Castleton**, VT 05735

Entry Fee: Only \$30.00 for wrestlers not part of the **Castleton** Camp

Rules: High School rules Periods 1:30 – 1 – 1 Wrestling is from 9 am -12 noon

Divisions: Ages 8-Graduated Seniors

Elementary Division

Middle School

High School (Which includes 2021 graduates)

Pooling: 4 Person Pools, Round Robin Format when possible. Madison Weights

Register by emailing Scott Legacy or Jeff Whitesell to let us know who is coming or you may text or call us.

Scott Legacy- 802-379-6232 or [scott.legacy@castleton.edu](mailto:scott.legacy@castleton.edu)

Jeff Whitesell – 802-688-5611 or [jeff.whitesell@castleton.edu](mailto:jeff.whitesell@castleton.edu)

**Athletes must prove vaccination or a negative covid test 72 hours before to compete. There is no specific test and may be a hard copy or on the proof on their phone.**

Bring this completed form with you or send the

completed registration form and entry fee to:

**Castleton** University Wrestling  
C/O Scott Legacy

190 University Drive

**Castleton**, VT 05735

Registration Fee: \$30.00

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_

Team Representing: \_\_\_\_\_ Grade: \_\_\_\_\_

Coach: \_\_\_\_\_ Cell Phone#: \_\_\_\_\_

Email address: \_\_\_\_\_

Address: \_\_\_\_\_

I realize that participation in any athletic activity involves risk of injury. I hereby agree to waive any claim against **Castleton** University, and its instructors for any injuries suffered by my child during this camp. I will be responsible for all medical or other charges in connection with my child's attendance at camp tournament.

Insurance Company Policy: \_\_\_\_\_

Signature (Parent/Guardian: \_\_\_\_\_ Date \_\_\_\_\_