Rob Waller’s
ALL-AMERICAN 2013
WRESTLING (Satellite) CAMP
@ Knoch Primary School
328 Knoch Road, Saxonburg, PA 16056
July 7-11$th$-2013

The Choice
Of Champions

Featuring

Rob “Coach” Waller: Director and Head Clinician of the All American Wrestling Camps since 1973, inducted into Pennsylvania Wrestling Hall of Fame, 2009 inductee into the State University of New York at Delhi Athletic Hall of Fame, Junior National Freestyle team coach 2001, high school coach for 25 seasons, two time Olympic finalist.

Teyon Ware 2x NCAA Champion, 4 time All-American & 2012 World Champion. Assistant Coach at Binghamton University, 4X Oklahoma State

Robbie Waller, III NCAA Champion, 2 time NCAA finalist and 4 time NCAA qualifier, PA State Champion and 3 time PIAA All-American (Mount Pleasant Area High School)

Troy Letters NCAA Champion, 3 time All-American, Head Coach Clarion University, 3 time PIAA (Pennsylvania Interscholastic Athletic Association) state champion (Shaler Area High School)

Ian McLaughlin: National Prep Champion & OW 2008, Wrestled at University of North Carolina, Chapel Hill

When: July 7-11, 2013
Where: Knoch Primary School, 328 Knoch Rd., Saxonburg, PA 16056
Cost: $150.00-call 724-285-8656 for information on family and team discounts
Session times: Doors open at 8 AM for early drop off, 5 PM for late pick up!
9-11:30 Technique Session
Lunch
12:30-3:00 Technique and Live Wrestling
Camp ends at 3:00 PM each day.

*More state qualifiers, more state place winners, and more state champions have attended our camps than any other camp in Western Pennsylvania!
The Following Release form must be signed and returned

1. Permission to Treat
Coach McLaughlin/Waller and/or his designee (i.e.: staff member) have permission to have
_____________________________________
Treated if necessary at the appropriate facility if he is injured, or if he appears to be injured

2. Indemnification By Parent or Guardian of Applicant
The Undersigned parent or guardian of
___________________
(Wrestler's name)
The applicant, for and in further consideration of the wrestling camp accepting said applicant does hereby release and discharge the curators of Rob Waller's All-American Wrestling Camp and its representatives, employees and agents from any and all debts, claims and demands, actions, damages, causes of action, judgments or suits of any kind which may result of this applicant participation in, traveling to or from the All-American Wrestling Camp, and hereby agree to have and indemnify and keep harmless the curators of the All-American Wrestling Camps, its representatives, employees and agents against liability claims, judgments or demands for damages arising as a result of any course instruction given the applicant by Rob Waller’s All-American Wrestling Camps

Signature of Parent/Guardian Date

Are you or your dependents entitled to health benefits under any employer, Union, Group Plan, Group Blue Cross, Blue Shield, Medicare, Medicaid, Select Blue or other HMO or any other government Program?

_____ YES  _______ NO

If So Person Carrying Coverage

Name

EMPLOYER or Sponsoring Organization

Insurance Company

Plan or policy#

All American Wrestling Camp Application

Name: ______________________________
Street: ______________________________
City: __________________ State: ______ Zip: ______
Home# (___) ______-________ Work# (___) ______-________
Cell# (___) ______-________
Email: ______________________________

Parent/Guardian Signature: ______________________________

Age: _______ DOB: ___________ Weight: _______

# of years Wrestled: __________________

Notable Accomplishments: __________________

T-Shirt Size (Circle One)

Youth: M L  Adult: S M L XL XXL XXXL

Make checks payable to: Mark McLaughlin
Head Coach, Knoch High School
Mailing address: 174 East Airport Rd.
Butler, Pa 16002
Phone: 724-822-7473

Credit Card Payment: Visa _____ MasterCard_____
Card Number: ______________________________
Expiration Date. ___________
Amt. to be charged: ______________________________

Card holder Name: ______________________________
Card Holder Signature: ______________________________

Feel free to call Coach Waller regarding his year-round All American Wrestling Club at his training center in Latrobe, PA

724-423-7112 (Home) 724-306-0056 (Cell)
NOTE: Visit Coach Waller’s All-American WEBSITE @
www.wrestlingreport.com/waller