



Youth Summer Wrestling Camp
Hosted by Dobyys-Bennett High School

TUESDAY, JUNE 4
8:00 AM – 12:00 PM

Age: Kindergarten through 8th Grade

LOCATION: Wrestling Room inside Buck Van Huss Dome (back entrance)

COST: \$25 & includes lunch

Checks made payable to Dobyys-Bennett Wrestling

Registration information:

STUDENT NAME: _____

AGE: _____

ADDRESS: _____ CITY: _____ ZIP: _____

SCHOOL: _____

PARENT WORK/EMERGENCY PHONE: _____

EMAIL: _____

I/we _____ hereby give permission for _____

to participate in the 2019 Dobyys-Bennett Wrestling Clinic on June 4. I understand that sports activities involve the potential for injury. I/we understand that there is no insurance coverage or payment of loss provided by Kingsport City Schools (KCS) for any injury, no matter how severe. I/we further agree to hold Kingsport City Schools, its employees, agents, and assigns harmless from any liability arising out of my/our child's participation in this activity. I/we further grant permission to KCS and/or its coaches, physicians, trainers, and/or EMTs to render any aid, treatment, medical, or surgical care deemed reasonably necessary to the health and wellbeing of my/our child and understand that any cost associated with said treatment will be borne by me/us.

Signed: _____ Date: _____

Print parent/guardian name: _____