

2013 SAINT IGNATIUS HIGH SCHOOL

WILDCAT WRESTLING CAMP

For Boys Grades K-8

Tuesday-Friday
June 11 - 14, 2013
2:00 - 5:00 pm



1988 State Champions!

*15 Individual State
Champions!*

State Qualifiers Every Year!

MARK SULLIVAN



- Head Coach Saint Ignatius High School.
- 1978-79 Ohio State University Ranked 5th in Country, Division I Freshman Year.
- 1984 U.S. Olympic Team Trials Finalist
- Two time Division III National Runner-up John Carroll University
- 1983 Northeast US Freestyle Champ.
- 1980 Ohio State University-Michigan football game Most Valuable Player

Camp Instructor/Technician
TADAAKI HATTA



- 2008 US Olympic Women's Freestyle Coach
- 2009 USA Wrestling Coach of the Year
- USA Wrestling Gold Cert. Coach
- USA Olympic Men's Team Coach 1988, 1992, 1996
- NCAA Champion Oklahoma State University
- Varsity Wrestling Coach, Saint Ignatius High School

**WHAT WILL YOU LEARN AND DO AT
THE WILDCAT WRESTLING CAMP?**

- **Instruction** - Activities will focus on basic and advanced skills with stance, takedowns, escapes, breakdowns and falls.
- **Tactics** - Games and exercises will help each wrestler improve his mat awareness, strategies, and reading his opponent to get the edge in competition
- **Conditioning** - Challenging physical exercises will focus on coordination, agility, speed & balance.
- **Developing Athletes** - Items specific to wrestling, like nutrition, and hydration, will be addressed.
- **Overall** - Wrestlers will be challenged, have fun, and improve their skills in a supportive environment.
- **Camp Staff** - Additional instructors include Saint Ignatius wrestling coaches, graduates of the wrestling program, and current wrestlers.
- Each camper will receive a camp T-shirt. Wrestlers should bring their own water each day.

**TRAIN WITH CHAMPIONS.
TRAIN LIKE A CHAMPION.**

**REGARDLESS OF SKILL LEVEL,
EVERY PARTICIPANT WILL
IMPROVE HIS WRESTLING.**

**Online Registration can be completed at:
https://www.ignatius.edu/wrestling_camp**

REGISTRATION

Name: _____

Age: _____ Birth Date: _____

Grade entering Fall 2013: _____

School: _____

Club Team: _____

Parent/Guardian: _____

Address: _____

City: _____

Home Phone: _____

Parent Cell Phone: _____

E-mail: _____

Emergency Contact: _____

Emergency Phone: _____

T-shirt size: (please circle)

Adult: S M L XL

Youth: S M L

EMERGENCY MEDICAL INFORMATION

Name: _____

Height: _____ Weight: _____

Known allergies or Reactions:

Medications currently taking:

Emergency Contact Name:

Emergency Phone:

Circle if known to have any of these conditions:

Diabetes

Epilepsy

Hemophilia

Heart Condition

**Past illness or other information that would be
useful in the event that treatment is necessary:**

Return registration form and camp fee of \$80 – payable to “St. Ignatius High School”. Registrations need to be received by June 7.

St. Ignatius High School
Attn: Sean O’Toole
1911 West 30th St
Cleveland, OH 44113

Camp questions can be directed to:
Coach Mark Sullivan
Buckeye9766@gmail.com

PARENT/GUARDIAN AUTHORIZATION AND DISCLAIMER

I am aware of the risks, hazards and inherent dangers that may arise due to my child’s participation in the Ignatius Wildcat Wrestling Camp. In consideration of being allowed to participate in said activity, I hereby release, waive and discharge St. Ignatius High School, the Wildcat Wrestling Camp, its instructors, agents, and employees from every claim, liability or demand of any kind sustained, whether caused by the negligence of the school, camp, instructors or otherwise. This release shall be binding upon any heirs, administrators, executors and assigns of mine. I further agree to indemnify the school and camp from any loss, liability damage or cost it may incur due to my participation in said activity in any way whether caused by the camp or otherwise. In the event of illness or injury arising directly or indirectly out

of said activity, I hereby give my consent and authorization for the administration of first aid care and treatment by a licensed trainer and/or physician, and assume all risks resulting from the participation in all activities of the camp. I further declare and warrant that I am covered by sufficient medical and dental insurance and that such insurance will remain in effect during my child’s participation in said activity.

Signature of Parent/Guardian Date

LEARN MORE ABOUT ST. IGNATIUS HIGH SCHOOL
www.ignatius.edu