



Brown Bears in the Mountains:

An All American Wrestling Camp System

The camp will concentrate on instruction and drilling for beginning to advanced wrestlers. It will cover techniques and drills from the feet, top, and bottom positions. We will also wrestle live at the end of each day. Camp participants will learn in a fun atmosphere under the direction of our experienced staff.

Clinicians:

Todd Beckerman

2x NCAA All-American & Male Athlete of the Year for the University of Nebraska, First ever 4x National Prep Champion for DeMatha High School, High School career record 208-1, and current Brown University Head Wrestling Coach.

Josh Metcalf

Head Wrestling Coach at Asheville High School, UNC-Pembroke.

Chad Rundell

Assistant Wrestling Coach at Asheville High School; wrestled for Boise State University.

Steve Hayleck

Assistant Wrestling Coach at Asheville HS; wrestled for University of Maryland and All Air Force Team.

**Other clinicians to camp staff based on availability and final camp enrollment.*

WHERE: Asheville High School, 419 McDowell St, Asheville, NC 28803

WHEN: June 13-15, 2018 (Wednesday-Friday)**

TIMES: 2 sessions a day: 10:00am-12:00pm* and 1:00pm-3:00pm

**Please bring your lunch for the break from 12:00pm-1:00pm*

COST: Prior to June 1: \$125 T-shirt to first 30 campers that register by this date. Circle size YL S M L XL
After June 1: \$150

AGES: Co-ed Ages 6-18 as of September 2017

****Camp is open to any and all campers that meet the listed age requirement****

TO ENROLL: Please make the check or money order payable to **Beckerman Fitness LLC**

For questions about the camp, please contact Steve Hayleck @ wrestlingterp@hotmail.com call 301.633.1247 or Josh Metcalf @ bravefullback42@gmail.com

Registration Form

Name _____ Email _____ Age _____

Address _____ City _____ State _____ Zip _____

Home phone () _____ Cell () _____ Wrestling Weight _____

Please read and sign: I have no knowledge of any physical impairment that would prevent the camper from participating in this program. The Camp has my permission to provide emergency medical treatment and I also authorize the hospital medical staff to administer treatment, as necessary, for my child. Every attempt will be made to contact the parent or guardian before administering treatment. I, the Parent, release the All American Wrestling Camp System, Asheville High School & Brown University from any and all liability.

Signature of Parent: _____ Date: _____

Make Checks Payable to: *Beckerman Fitness LLC*

Mail Registration to: Todd Beckerman, 2 Edison Ave, Providence, RI 02906

Check out the camp at: <https://www.bearsrestlingclub.com/>