

Colorado School of Mines

15th Annual

Summer Wrestling Camp



Colorado School of Mines Coaching Staff

Dan Lewis, Head Wrestling Coach, Colorado School of Mines. Coach Lewis has been directing wrestling camps since 1983 and has coached and instructed thousands of youth, high school and college wrestlers on how to be champions in wrestling and in life. As a competitor Coach Lewis represented the United States several times in international competitions; twice in the World Championships and once in the Pan Am Games where he was a Gold Medalist.

Josh Hutchens, Assistant Coach, Colorado School of Mines. A graduate from Purdue University, Hutchens was third in the Big 10's and was a qualifier for the NCAA Division I Championships, in 1998. Coach Hutchens was hired at Mines as the assistant coach in 2002 and moved to James Madison University, where he was the Head Coach of the Division I program from 2004-2007. Hutchens is an expert in the field of coaching and is an outstanding clinician. He has the unique ability to teach the most up to date technique to the novice and advanced wrestler alike.

Mike Marsh, Assistant Coach, Colorado School of Mines. Coach Marsh is an Icon in Colorado Wrestling. A Western State College wrestler and a graduate of Colorado State University, Marsh was a coach and teacher in the Jeffco system for 35 years, coaching numerous state place winners at schools such as Arvada, Evergreen and Lakewood High Schools.

GENERAL CAMP INFORMATION

INDIVIDUAL CAMP FORMAT

June 22-26 **Ages 10-17**

Mines Individual Wrestling Camp is designed to develop strong fundamentals for the beginner, intermediate, and advanced wrestler. This camp is designed to increase knowledge in all areas of wrestling including leg attacks, defensive techniques, wrestling, leg turns, pinning combinations, and throwing techniques. Mines clinicians are some of America's finest technicians, and all experts in their field.

RULES AND SUPERVISION

Campers will be supervised through the entire camp by college counselors and high school coaches. For your safety, and the safety of the other campers, all campers must abide by the rules and regulations of the camp. Non-compliance to these rules will result in immediate dismissal from the camp without refund.

CONFIRMATION

Each applicant will receive a confirmation letter approximately three weeks after the application has been received and processed. The letter will include what to bring, map and directions.

TUITION- INDIVIDUAL CAMP

Commuter (9:00 a.m. to 6:30 p.m.)
Lunch included.... \$175.00

Overnight (Sunday through Thursday afternoon) Lodging & Meals included
Included with fees, camp T-shirt, camp mat water bottle and trip to Water World
...\$325.00

HOUSING

Meals and lodging will be on the Colorado School of Mines campus. Campers will be housed two to a room. If you wish to room with a friend, please indicate it on the camp application.

Check in Time and Location

Overnight and Commuters
Sunday, June 22, 2008.
11:30 a.m. to 1:00 p.m.

COLORADO SCHOOL OF MINES WRESTLING CAMP APPLICATION

PLEASE FILL IN ALL SPACES AND MAIL \$75

Name _____ Birth Date _____ - _____ - _____

Address _____
Street City State Zip

Home # _____ 2008 Grade _____ High School _____

Coach's Name _____ T-shirt Size Men's XL-L-M-S ____ Approximate Weight _____

Roommate Preference _____ (if staying overnight)

HOLD HARMLESS AGREEMENT

I agree to hold harmless Colorado School of Mines and all of their employees, officers, and agents in the event of an injury occurring to my son, who will participate in a program of skills, instruction and evaluation in sport of wrestling during the period from June 22-26th 2008 on the campus of Colorado School of Mines. I recognize that participating in this activity has a certain amount of risk and that an injury is always possible. Injuries may include cuts, fractures, and abrasions. I certify that my son is, to the best of my knowledge, physically able to participate in this activity. I assume full financial responsibility for medical expenses arising out of such injury above any insurance provided by the program. I hereby authorize the camp director to act for me according to his best judgment in any emergency medical situation.

Please Print Parent's Name

Parent's Signature

Camper's Health Insurance

I.D. # If Applicable

Please Check one:

INDIVIDUAL CAMP June 22-26

_____ Overnight.....\$325

_____ Commuter\$175

Please make your check payable and forward to: **CSM Wrestling Camp**, Athletic Department, 1500 Illinois St., Golden, CO 80401

Contact Information: Dan Lewis, Head Wrestling Coach: 303-273-3374

EIGHTY-NINE YEARS

of

WRESTLING TRADITION

1919-2008