

# **NOC YOUTH & CAMP**

## **TAKEDOWN TOURNAMENT**

2nd-8th Grade Boys and Girls

Cost **\$150**

*Commuter-Only Camp*



**MAY 29-30, 2024**  
**NOC Tonkawa**



### **DAY 1**

8-9 am Check in  
9-9:30 am Welcome/Intros  
9:30-10 am Warm Ups  
10-11 am Technique Session 1  
11 am -12 pm Technique Session 2  
12-1 pm Lunch  
1-13:0 pm Warm Up  
1:30-2:30 pm Technique Session 3  
2:30-3:30 pm Technique Session 4  
3:30-4 pm Finish Up

### **DAY 2**

8-9 am Check in/Weight ins  
9-9:30 am Warm Ups  
9:30 am -12 pm  
Takedown Tournament

### **TO REGISTER, CONTACT**

**Head Women's Wrestling Coach**

**Jayden Miller**

**580.628.6762**

**[jayden.miller@noc.edu](mailto:jayden.miller@noc.edu)**

*Payment Accepted through NOC Development Office located inside the  
Library-Administration Building, NOC Tonkawa, 580.628.6214 or you may bring payment to camp.  
Please make checks payable to NOCF Wrestling.*



**NOC** Life changing.

# SIGN-UP FORM

Bring this form with you the first day of camp.

Name \_\_\_\_\_ Grade[next year] \_\_\_\_\_ School \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email Address: \_\_\_\_\_

Contact Names & Numbers:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

## DEFINITION OF LIABILITY AND LIMITATIONS

All campers will be covered by an Excess Accident Medical Insurance policy which is understood to pay \$5,000.00 in medical expenses, including accidental death and dismemberment, for injuries sustained during camp sessions. Any medical or related expenses not covered by this policy are the responsibility of the parent.

Signed \_\_\_\_\_ Parent of \_\_\_\_\_

## APPOINTMENT OF AGENT

I hereby appoint Camp Director or Assistant Director, of lawful age, as my agent and representative for the purpose of

Authorizing and counseling to hospital care and or medical care and treatment of \_\_\_\_\_  
for any illness or injury that may occur while such person is in the care or custody of the agent during the camp while I am  
away, on vacation, or otherwise not immediately available to give such consent.

Allergies \_\_\_\_\_

Parent or Guardian \_\_\_\_\_

For More Information Contact  
Coach Jayden Miller • 580.628.6762 • jayden.miller@noc.edu