



## ALBERTA AMATEUR WRESTLING

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### **2019 Western Canada Summer Games Talent Identification Camp**

We invite all wrestlers (born in 2003, 2004, 2005, 2006) who are interested in representing Alberta at the 2019 Western Canada Summer Games to attend this talent identification camp! Come meet the coaching staff, learn valuable technique and work with your fellow Team Alberta hopefuls! Information on the trials on June 15<sup>th</sup> and the whole training program this summer will be discussed.

**Who:** All athletes born in 2003, 2004, 2005, 2006 (U17 & Bantam)

**Cost:** \$25

**Date:** May 3-5, 2019

**Location:** University of Calgary Wrestling Room

**Schedule:** Friday, May 3: 5:00 pm – 7:00 pm

Saturday, May 4: 10:00 am – 12:00 pm, 1:00 pm – 3:00 pm

Sunday, May 5: 9:00 am – 11:00 am

If you have any questions, please contact Program Director Andy Ross at [aawaprogramdirector@gmail.com](mailto:aawaprogramdirector@gmail.com)

**REGISTER AT THE FOLLOWING LINK:** <https://forms.gle/vMTLPXkzdQghTk177>

If not an AAWA member, please bring the completed and signed waiver to the first session.

A PayPal invoice will be sent to the contact email upon registration. Please pay this invoice in advance of the camp. Payment can also be made by phone at 780-993-1150.

2019 WCSG Talent ID Camp  
May 3-5, 2019

Waiver and Assumption of Risk Agreement

I, \_\_\_\_\_, hereby acknowledge that participation in the athletic events and planned activities of the Talent ID camp might result in personal injury, property damage and/or loss. I fully understand these risks and hereby agree to participate in the Talent ID camp voluntarily and at my own risk.

I agree that the Alberta Amateur Wrestling Association, and any of their servants, agents, sponsors, volunteers or employees will not be held responsible for any accidents or loss however caused and agree to release that same from all claims or damages that may arise as a result of or by any reason of such accidents or loss.

\_\_\_\_\_  
Signature of Participant

\_\_\_\_\_  
Participant Name (Please Print)

\_\_\_\_\_  
Parental Signature (if participant under 18)

\_\_\_\_\_  
Date

**Note: If not an AAWA member, this waiver must be handed in prior to participation in the camp.**