

Youth Wrestling Clinic CLAW Club Youth Wrestling Invites All K – 8th Grade Clinic dates:

Thurs, Nov 5, 2019 – Thurs, Feb 30, 2020 (Mar 31, 2020 for Extended/Full Season)

Register your wrestler at the door, beginning Nov. 5th!

Weekly Schedule:

K – 2nd Grade, Tues & Thurs 6:15 - 7:15 PM 3rd – 8th Grade, Tues & Thurs 7:15 - 8:30 PM

Register for the Elite Package for:

3rd clinic night Mon or Wed evenings each week, recommended for our competition team!

Clinic Location: Commack High School Wrestling Room

SEE BACK FOR REGISTRATION PACKAGE DETAILS

- ☐ Regular Season: \$150.00/wrestler
- □ Extended Season: \$190.00/wrestler
- ☐ ELITE PACKAGE: \$265.00/wrestler

20% family discount applied to all packages when registering TWO (2) family members together

Includes CLAW Club registration and CLAW Club T-Shirt

NOTE: Competition-ready wrestlers must have current USA Wrestling cards to compete at tournaments. Go to http://www.usawmembership.com/ to purchase or renew your USA Wrestling Membership.

- No required parent participation fees!
- Fun, healthy conditioning activity!
- Licensed, experienced, knowledgeable coaching staff!
- Planned curriculum to build a strong wrestling foundation!

For Private Lesson inquiries please speak with Coach Yodice at any of our practices

Contact: Coach Yodice Email- Justinyodice@gmail.com Cell- 631.338.3841







Package Details:

The Full Season is ran by Coach Yodice who is one of the Commack Middle & High School coaches with over 15yrs of wrestling and 7yrs of coaching experience. In addition, he is still active in the sport of wrestling and MMA. Coach Yodice is a licensed Wrestling Coach in NY and is also a licensed EMT. He also is certified through NASM as a Nutrition Specialist.

Regular Season: \$150.00/wrestler

Dates: Beginning of Nov 2019 - End of Jan 2020

K – 2nd Grade, Tues & Thurs 6:15 - 7:15 PM 3rd

3rd – **8**th **Grade**, Tues & Thurs 7:15 - 8:30 PM

2 Practices a week (20 sessions, accounting for holidays, across 3 months)

We recommend this package to novice/beginners. This is perfect for building a foundation of wrestling and sparking the interest of your young wrestler. Our primary goal is to have fun while building an appreciation for the sport.

Note: At the end of the regular season you can upgrade to the Extended Season for \$60.

\$150/20 Sessions = \$7.50 per session

Extended Season: \$190.00/wrestler

Dates: Beginning of Nov 2019 - End of Mar 2020

K – 2nd Grade, Tues & Thurs 6:15 - 7:15 PM

3rd - 8th Grade, Tues & Thurs 7:15 - 8:30 PM

Full Season 2 Practices Weekly (20 sessions, plus an additional 11 sessions across 5 months) We recommend this package to committed wrestlers dedicated to having fun while learning and building an appreciation for the sport! The last 11 sessions are slightly more physically and mentally demanding. We will also cover higher level techniques.

\$190/31 Sessions (20 Regular + 11 Extended) = \$6.13 per session

ELITE PACKAGE: \$265.00/wrestler

Dates: Beginning of Nov 2019 - End of Mar 2020

All 31 sessions, plus 15 ELITE Practices on Mon or Wed nights 7:15PM - 8:30 PM

We recommend this package to intermediate/advanced wrestlers looking to build off of their foundation of wrestling and make the jump to the next level. This is an excellent experience for middle school wrestlers preparing for their journey to the High School. Our Elite Practices will feature Coach Labate, who is a highly decorated wrestler/coach.

\$265/46 Sessions (31 Full Season + 15 Elite Practices) = \$5.76 per session

Please Note: We accept CASH & Checks (Checks made payable to: Commack CLAW Club)

You may complete the attached registration form prior to the November 5th registration night, for your convenience.

We hope to see you on the mat!









CLAW CLUB Youth Wrestling Program Registration 2019-2020

| Official Use Only | 7 |
|-------------------|---|
| Package: 1 2 3 | |
| Paid: \$ | |
| Payment Due | |
| Family Rate | |
| Tee received? Y | N |

| ****** | | Date: | | | 555 | mily Rate e received? Y N | |
|--|---|---------------|-------------|--------------|--------|------------------------------|--|
| RESTLINE | Wrestler's Name | : | | | | | |
| | Approx. Weight: | G | ade: | _ Date of Bi | rth: | | |
| Wrestling Expe | erience (circle): | No experience | 1 year | 2 yea | ars 3 | 3+ years | |
| Note: All athletes who wish to participate in competitions must have an active USA Wrestling Card. You may purchase or renew a USA Wrestling membership at: https://www.usawmembership.com/ SEE BACK OF REGISTRATION FLYER FOR PACKAGE DETAILS Regular Season: \$150.00/wrestler ELITE PACKAGE: \$265.00/wrestler Please Note: We accept CASH & Checks (Checks made payable to: Commack CLAW Club) | | | | | | | |
| Parent(s) Name: | | | Home Phone | e: | | | |
| Address: | | | ity: | | State: | Zip: | |
| Home Phone: | | Cell Phones: | Mom: | | _ Dad: | | |
| Emails: | /lom: | | _ Dad: | | | | |
| Emergency Contact Nan | ne: | Emer | gency Conta | ct Phone:_ | | | |
| Relationship to Wrestler: | | | | | | | |
| Shirt Size (circle one): | YS (40-59 lbs.) AS (110-129 lbs.) | · | , | • | | , | |
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Parental Waiver and Consent:

While the CLAW Club strives to provide a safe and fun environment for your child to learn the sport of scholastic wrestling, all athletic training and sports activities involve inherent risks of injury that cannot be fully eliminated. By signing below, you, the parent/guardian of the above wrestler, acknowledge that there are certain risks of physical injury as your child participates in the CLAW Club Youth Wrestling Program:

I agree to waive any liability that may arise associated with my child's participation in this program. I further assume the full risk of any injuries and expenses which my child may sustain while participating in any activities associated with the CLAW Club Youth Wrestling Program. I agree to indemnify and hold harmless The Commack CLAW Club, its coaches and volunteers, the Commack Booster Club and the Commack Union Free School District, from all actions, claims, or demands which my child may have against these parties arising from participation in the CLAW Club Youth Wrestling Program on account of any loss, damage, or injury while participating in any activities associated with the CLAW Club Youth Wrestling Program.

| Parent or quardian's Signature | Date |
|--------------------------------|------|