

Jeff Jordan's State Champ Camp
Team Application

Team Name: _____
Coach: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: (____) _____ Email: _____
Cell Phone: _____

Wrestlers Names

1. _____ 2. _____ 3. _____ 4. _____
5. _____ 6. _____ 7. _____ 8. _____
9. _____ 10. _____ 11. _____ 12. _____
13. _____ 14. _____ 15. _____ 16. _____

Office Use Only

Date Received: _____ Check# _____ Amount _____ :

- 8 weeks available for camp sign-up.
- Coach to wrestler ratio 1 to 6.
- Please list as many weeks as possible, preferably 6 or more, that you are available to attend.
- Make sure on week #1 school is out.
- Deposit & Completed applications are mandatory before placement process begins.
- Selections for camp will be made in March and early April.
- Airport pickup fee: \$75 Dayton, \$100 for Columbus; please send fee with deposit.
- No parents are allowed to stay at facility during week long camps.
- One coach must attend with team.
- Minimum of 8 wrestlers per team.

Application Deadline: March / Early April

#1 May 27 - 31 _____	#7 July 8-12 _____
#2 June 3-7 _____	#8 July 15-19 _____
#3 June 10-14 _____	#9 July 22-26 _____
#4 June 17-21 _____	#10 July 29 – Aug 2 _____
#5 June 24-28 _____	#11 Aug. 5-9 _____
#6 July 1-5 _____	#12 Aug 12-16 _____

I understand that Jeff Jordan and all other personnel associated with the State Champ Camp assume no responsibility for accidents, injuries, or medical or dental expenses incurred by my son at camp.

Parent Signature (or legal guardian)

Make check payable to: Jeff Jordan's State Champ Camp, LLC
Camp Cost: \$375 per wrestle -\$500.00 per team deposit (non-refundable), balance due at arrival.
(If not placed at camp, deposit will be refunded.) (Must give 2 week notice for any cancellations.)

Mail Application to:
Jeff Jordan
1954 Neff Road
Urbana, Ohio 43078