

2024 IDAHO BEACH BUM CAMP JULY 7^m - 17^m



Camp Schedule:

Sun July7^h travel day to Pasco, WA Mon July 8th Redneck Duals Pasco HS Tue July 9th Redneck Duals Pasco HS Wed July 10^h Redneck duals Pasco HS Thu July 11^h relax/recover Trask River Fri July 12^h crabbing @ Kelly's Marina Sat July 13th Cheese Factory/day at the beach Sun July 14th Day of rest/team-building (Trask river) Mon July 15th Team camp - Tillamook HS Tue July 16th team camp - Tillamook HS Wed July 17th travel day – Home sweet home!

Dates & Location: July 7 th -17 th (Pasco, WA / Tillamook, OR)		
Registration: Please contact Coach Jody Webb to get registered. (208) 602-9133		
Camp Fee: \$500 Make Checks payable to Outlaws Wrestling Club 1986 Hoopes Ave, Idaho Falls, ID 83404		
Venmo: @OutlawsWrestlingClub-13		
Age Requirement: Must be High School age for 2024-2025 School Year		
For Questions – Please call Coach Webb or email him at jodywebb84@gmail.com		
Camp Fee includes ALL meals, travel, and lodging!!!		

Camp Registration information

Wrestler's Name	Age DOB
Parent(s) names	Emergency #
Email address:	
Insurance Provider:	Policy #:
School your wrestler attends.	. School Grade:

Waiver and Release Form / Medical Information

I fully understand that the Outlaws Wrestling Club, Inc. staff are not physicians or medical practitioners of any kind. With the above in mind, I hereby release the Outlaws Wrestling Club staff to render temporary first aid to my child or children in the event of any injury or illness, and if deemed necessary by the Outlaws Wrestling Club staff to call our doctor and to seek medical help, including transportation by an Outlaws Wrestling Club staff member and / or its representatives, whether paid or volunteer, to any health care facility or hospital, or the calling of an ambulance for said child should the Outlaws Wrestling Club staff deem this to be necessary.

In consideration of your acceptance of this entry, I intend to be legally bound hereby for myself, my heirs, executors and administrators waive and release Outlaws Wrestling Club, THEIR AGENTS, REPRESENTATIVES, COACHES, VOLUN-TEERS, FROM ANY AND ALL CLAIMS OR RIGHTS TO DAMAGE FOR INJURIES OR LOSSES SUFFERED BY ME DIRECTLY OR INDIRECTLY IN TRAINING OR TRAVELING TO OR FROM OR COMPETING IN, OR ATTENDING the training camp.

Parent or Guardian Signature____

_____ Date: ____ / ____ / ____

***This is not sponsored by Thunder Ridge High School or District 93.