

## Philosophy

Our youth program is designed to introduce boys (grades 1- 6) to the sport of wrestling. The program is designed to create a positive and structured learning environment for youth wrestlers. Participants will be exposed to the sport through basic fundamentals and drills appropriate for the age group. There will be an emphasis on fun and participation through drilling, practicing, and live wrestling situations.



A true measure of a champion is not their wins and losses, but how they handle and what they learn from each one.

-Coach Kropman

## Fun and Fundamentals

- Basic Stance & Takedowns
- Top & Bottom Position
- Basic Riding & Pinning
- Escapes & Reversals
- Safety (On & Off the Mat)
- Wrestling Games

WHAT YOU NEED: a water-bottle, shorts, t-shirt and sneakers!

Wrestling shoes and headgear are optional.

ALL PARTICIPANTS receive a camp T-shirt

[www.penfieldwrestling.com](http://www.penfieldwrestling.com)

### \*\*NOTE:

The Town of Penfield does not carry medical insurance for program participations. All policies and procedures found in the Penfield Recreation 2012-2013 Winter/Spring program brochure are in effect.

### ALSO

Two make-up dates(MARCH 5,7) are built into the schedule to allow for any cancellations that may occur during the course of the program.

Penfield Recreation Department  
Presents:

# PENFIELD



WINTER SESSION 2013

JANUARY 8 – MARCH 7

SCRIBNER ROAD SCHOOL GYM

Tuesdays & Thursdays

6:30 – 8:00 (includes clean-up)

NO SESSIONS

DURING WINTER RECESS

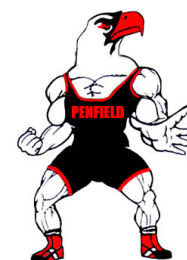
Course # 119010-A

Fee: \$50.00 (includes shirt)

SESSIONS ARE

JANUARY 8, 10, 15, 17, 22, 24, 29, 31

FEBRUARY 5, 7, 12, 14 & MARCH 5, 7



No  
Experience  
Necessary!

## Registration

Penfield Recreation Information

Complete the form on the right  
using Course # 119010-A  
Mail/drop-off registration form  
with payment to:  
Penfield Recreation  
1985 Baird Road  
Penfield, NY 14526

OR

Register Online Using  
Course # 119010-A at  
[www.penfield.org](http://www.penfield.org)

Cost: \$50  
Includes a Penfield Youth  
Wrestling T-shirt

## Coaching Staff

**Scott Kropman – Youth Development Coach**  
(585) 734-1930  
[wrestling@penfieldwrestling.com](mailto:wrestling@penfieldwrestling.com)

**Pat Quinlan – Penfield Wrestling  
Assistant Coach**

*The Penfield JV/Varsity staff and wrestlers will  
also assist with the program.*

PENFIELD RECREATION, 1985 BAIRD ROAD, PENFIELD NY 14526 - 585-340-8655

(PLEASE PRINT) **Recreation Registration Form** (\*Fill out form completely including signature\*)

PARTICIPANT NAME \_\_\_\_\_ SEX \_\_\_\_ DOB \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_ Ext \_\_\_\_

If Participant Under The Age of 18, Please Complete The Following Shaded Area: **E-MAIL** \_\_\_\_\_

PARENT NAME _____	DAY PHONE # _____	RELATIONSHIP (Mom/Dad) _____
2ND PARENT NAME _____	DAY PHONE # _____	RELATIONSHIP _____
SCHOOL THAT CHILD IS ATTENDING _____		GRADE _____

Resident of Penfield or Penfield School Dist.  
Yes \_\_\_\_ No \_\_\_\_




Please list all courses which you wish to register for:

Program Name (First Choice)	Course # (including section)	Program Fee	IF COURSE IS FULL, YOUR 2ND CHOICE
1) _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	\$ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
2) _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	\$ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
3) _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	\$ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
TOTAL AMOUNT ENCLOSED		\$ _____	

**WAIVER FOR PARTICIPATION** - IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, AND UNDERSTANDING THAT A CERTAIN AMOUNT OF RISK IS INHERENT TO SOME RECREATIONAL PROGRAMS, I HEREBY, FOR MY CHILD, MY HEIRS, EXECUTORS, AND ADMINISTRATORS, WAIVER AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I OR MY CHILD MAY HAVE AGAINST THE TOWN OF PENFIELD AND ITS REPRESENTATIVES, SUCCESSORS, AND ASSIGNS FOR ANY AND ALL INJURIES SUFFERED BY MYSELF OR MY CHILD AT ANY ACTIVITY SPONSORED BY THESE GROUPS. FURTHERMORE, IN THE EVENT A REFUND IS GRANTED FOR MYSELF OR MY CHILD FOR WHATEVER REASON WITH THE ABOVE STATED ACTIVITY, I DO HEREBY AUTHORIZE THE TOWN OF PENFIELD TO EXECUTE A REFUND VOUCHER ON MY BEHALF AND SUBMIT FOR PAYMENT UNDER THE TERMS AND CONDITIONS SET FORTH IN THE TOWN OF PENFIELD REFUND AND REGISTRATION POLICY. REFUNDS ARE SUBJECT TO A PROCESSING FEE.

**SIGNATURE** **X** \_\_\_\_\_ {PARENT/GUARDIAN/SELF (IF OVER 18)}

PLEASE LIST ANY ADDITIONAL INFORMATION HERE (e.g. Special Needs/Medical Notes/Requests/Other): \_\_\_\_\_

Check payable to: Penfield Recreation	VISA / MC / DISC Exp. Date ____/____/____ Account # _____	3-digit sec. code _____
  	Cardholder's Name: _____	Authorized Signature _____

TSHIRT SIZE (circle one)

Youth Sm M L

Adult Sm M L XL