Coppell High School

# All American Wrestling Camp

**Cody Brewer – The University of Oklahoma**

University of Oklahoma wrestler Cody Brewer will be our lead clinician. Cody just finished his sophomore season at OU and he has already been a two time All-American. In high school, Cody was a four time Missouri State Champion.

The training camp will be from 9:00 – 1:00 daily. We will have an ELITE training session from 1:00-3:00. This session is for wrestlers who to step up their training. The elite group will be run with some college style drilling, tactics, and mat strategy. The college wrestlers will also talk with athletes and coaches about recruiting and preparing for college. Financial assistance for CISD students is available. Please contact Coach Lowery.

**This camp is open to boys and girls. We will have several girls present from our own program.**

**Dates: June 16-19 (Monday-Thursday)**

**Time:**  Each day

9:00 – 11:00am Instruction & Drill

11:00 – 11:30 Break

11:30 – 1:00 Instruction & Live

1:00 – 3:00 pm Elite Training (Monday – Wednesday)

**Location:** **Coppell High School - Gymnasium**

185 W. Parkway

Coppell, TX 75019

**Directions:** CHS is located just west of Denton Tap on Parkway Blvd. The gym is located next to the north parking lot.

**Cost: $100.00 – Training Camp**

**$120.00 – Training Camp plus the Elite sessions**

Make Check Payable to:

**All-American Wrestling**

1960 Hobart Lane

Lewisville, TX 75067

**Questions: Chip Lowery**

**Office 214-496-6177 Cell 214-277-9300**

**Email at** [clowery@coppellisd.com](mailto:clowery@coppellisd.com)

This camp is for 4th- 12th graders only, with a limited enrollment.

Name

Address

City State\_\_\_\_\_Zip Phone Number ( ) Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Check #

## **T-SHIRT SIZE (Youth or Adult S-XXL)**

## Walk up registration is allowed. However, you may not get first choice of t-shirt size.

## I the undersigned, allow (participant’s name) to participate in the Coppell H.S. All-American Camp. I hereby waive all claims and hold Coppell Independent School District, its officers and employees from all claims arising from the reliance on this consent form.

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## (Signature of adult parent/guardian) date