

2025 Warrior Wrestling Camp

Featuring 2025 All-American Christopher Minto

June 2nd & 3rd

The Wahoo High School Wrestling team is excited to host its annual summer wrestling camp once again! This camp is designed to provide a fun and engaging environment where wrestlers of all ages can learn, grow, and improve their skills. Camp activities will include technique instruction, skill-building drills, and games.

Additionally, this camp offers a great opportunity for high school wrestlers to prepare for the team camp we'll be attending in June.

Cost \$50.00 per wrestler & includes a camp T-shirt, and snack during sessions.

Age: KDG through 12th Grade

Forms & Payment:

All entries must be mailed by May 22nd to ensure T-shirts during camp
Make checks payable to: *Warrior Wrestling Club*

Clinicians:

Featuring Christopher Minto
Wahoo High School Wrestling Coaches

Location:

Wahoo High School Wrestling Room

Schedule

Monday, Tuesday
11:30 am - 12:00 pm High School/ Middle School (6th- 12th) Check-in
12:00 pm- 2:00 pm HS/ MS Instruction: techniques, drills, & games
2:00 pm- 2:30 pm Elementary (KDG- 5th) Check-in
2:30 pm – 4:30 pm Elementary Instruction: technique, drills, & games



Honors and Awards

- NCAA All-American (2025)
- Nebraska Scholar-Athlete Honor Roll (Fall 2023, 2024; Spring 2024)
- Big Ten Freshman of the Week (Jan. 16, 2025, Jan. 30, 2025)
- Academic All-Big Ten (2025)
- NWCA Scholar All-American (2025)

For Questions Contact:

Tyler Hodges - (402) 480-0546 thodges@wahoowarriors.org

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Mail or Return to: Wahoo Wrestling % Tyler Hodges, 2201 N. Locust, Wahoo NE, 68066 **Please mail by May 22nd**

Name: _____ **Grade (2025-26):** _____ **School:** _____

Address: _____ **City, State, Zip:** _____

Phone Number: _____ **Alternate contact #:** _____

T-Shirt Size: (Circle one) **YS** **YM** **YL** **S** **M** **L** **XL** **XXL**

I accept full responsibility for the risk of serious injury or accidents that may occur during the camp. I release the camp directors, coaches, and Wahoo High School from any liability. I give permission for medical personnel to treat my child in the event of injury or illness. I also grant permission for the camp to use images of my child taken during the event for future promotional materials.

Parent Signature _____ **Date** _____