

## CAMP DIRECTOR



John Hughes is in his 11th year as Associate Head wrestling coach at Lehigh University. He is a 3 time All-American and 1995 NCAA Champion at Penn State.

One of the most highly respected coaches in

the country, Hughes has made an immediate impact in the training room, helping the program finish with back to back 8th place finishes in the NCAA tournament. He has helped develop 20 All-Americans while at Lehigh.

As an athlete, he ranks among the most successful wrestlers in the long history of Pennsylvania wrestling and the Penn State Program. He won 4 PIAA State Championships at Benton High School, becoming, at the time, just the 7th wrestler to accomplish the feat in state history. He went on to become one of 17 men to earn All-America honors 3 of more times at Penn State, reaching the NCAA finals twice during his career. He competed in 4 NCAA tournaments helping Penn State to 4 top 5 team finishes, including third place finishes in 1992 and 1994.

Hughes won a Big Ten Championship in 1995 and ranks top ten at Penn State with 121 wins. He also won a gold medal at the 1994 Pan Am Games and was a 1994 University Freestyle National Champion.

## STAFF COUNSELORS



Josh Humphreys

4X State Champ WV

Starting 157 lb Lehigh wrestler



Brian Meyer

NJ State Runner-up

157 lb Lehigh wrestler

# ONLINE REGISTRATION (CLICK HERE)

### 2019 Camp Schedule

May 10 - May 12 2019

**Friday 6pm-8pm**

**Saturday 10am -12pm**

**1pm-3pm**

**Sunday 10am -12pm**

**1pm -3pm**

## CAMP APPLICATION

Wrestler Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ Weight: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Insur. Provider \_\_\_\_\_

Insur. # \_\_\_\_\_

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**COST: COMMUTERS ONLY**

**\$175 per athlete for all sessions**

**\*\*\*\$150 if received by April 19, 2019\*\*\***

**NOTES: All coaches & counselors may not be available due to training, competitions or classes. Limited to the first 50 wrestlers. Open to all ages. Bring your own lunch. Walk-Ins are welcome. Air conditioned training facility. Direct any questions to [jhughes@lehigh.edu](mailto:jhughes@lehigh.edu) or 610-973-4130.**

***Make checks payable to: Hughes W/C Wrestling Camps***

**Mail form and check to:**

**Hughes W/C Wrestling Camps**

**Attn: John Hughes**

**1965 Collingswood Drive**

**Bethlehem, PA 18018**

## Parental Consent/Waiver of Responsibility

Authorization to Consent to Treatment of a Minor: I/we, the undersigned parent(s)/guardians(s) of the aforementioned child, do hereby give permission for the staff of Hughes World Class Wrestling Camps (HWWC) to seek emergency care for my/our child at the local medical facilities if I/we cannot be reached in the event of illness or injury. It is understood that this authorization is given in advance of any specific diagnosis or treatment being required, and I/we will pay for such emergency medical treatment. It is my/our understanding that if at all possible, we will be contacted in the event of illness or injury. This authorization shall remain effective until the end of the program, unless sooner revoked. Release of Liability: I/we, the parent(s)/guardian(s) of the aforementioned child, do hereby give permission for my/our child to participate in the Hughes World Class Wrestling Camps, hereafter HWWC, during the dates listed. I/we voluntarily agree to assume such risks. In consideration of the HWWC, based on my/our reputation that my/our child is in proper physical health and condition to participate, I/we agree; 1.) To assume all risk of injury to my/our child and risk of damage or loss of my/our child's property arising from said child's participation in the HWWC; except for HWWC negligence as determined by a competent jurisdiction; 2.) To release and forever discharge, the HWWC officers, agents, employees, and students, from any and all claims or liability including death, and for property damage or loss which may be suffered by me or my/our child arising out of or in any connection with my child's participation in the HWWC; and 3.) For my/our child, myself, or heirs, executors, administrators, and assigns to indemnify and hold harmless the HWWC and its officers, agents, employees, and students from any and all liability, claims, demands, actions, loss and damage arising out of my/our child's participation in HWWC. I/we are aware that this is a release of liability and a contract between the HWWC and myself/ourselves, on behalf of my/our child, and I/we sign it of my/our own free will.

\_\_\_\_\_  
Parent/Legal Guardian (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian (Print Name)

# HUGHES WORLD CLASS WRESTLING CAMPS



At

**Hershey High School**

**550 Homestead Road**

**Hershey, PA 17033**

**May 10-May 12 2019**

Hughes World Class Wrestling Camps

ATTN: John Hughes

1965 Collingswood Drive

Bethlehem, PA 18018