

Mitch Hancock's

SHAMROCK

TRAINED WRESTLING CAMPS



10 Team State Championships
1969 • 1970 • 1971 • 1974 • 1978 • 1983 • 1988 • 2010 • 2012 • 2013

53 Individual State Championships
13 Individual State Championships in past four years

CAMP DETAILS

Who: All Wrestlers, Grades 8th-12th

Date: Friday-Sunday, July 12-14

Location: Melvindale High School
18656 Prospect St., Melvindale, MI 48122

Cost:

- \$100.00
- Make all checks or money orders payable to Melvindale High School
- Send checks or registration forms to:
Melvindale High School
Attn: Ryan Vranerish
18656 Prospect St., Melvindale, MI 48122

For Registration Details, Contact Either:

- Ryan Vranerish at 313-389-3320 (office) or vranesr@melnap.k12.mi.us
- Faisal Munassar at 313-377-7779 (cell) or fmunassar@yahoo.com

CAMP SCHEDULE

Friday

Session 1 6-8 p.m.

Saturday

Session 2 10 a.m.- Noon

Session 3 1 p.m.- 3 p.m.

Sunday

Session 4 10 a.m.- Noon

Session 5 1 p.m.- 3 p.m.

Main Camp Clinicians

Other clinicians may be added later

Mitch Hancock

Detroit Catholic Central Head Coach

- Led DCC to three D1 State Championships in the last 6 years
- Coached over 45 All-Stater's and 9 State Champs to 13 Individual Titles in 5 Years
- 2012 MHSCA Coach of the Year
- 2010 Division 1 Head Wrestling Coach of the Year
- 2005 NCAA Division 1 All-American
- Two-time NCAA Qualifier
- 2005 Mid-American Conference Champion
- Midland's Finalist
- USA Junior National Finalist

Anthony Biondo

Detroit Catholic Central Assistant Coach

- University of Michigan Captain for 2 years
- Three-time NCAA D1 Qualifier
- Two-time Academic All-American
- Two-time University of Michigan Athletic Achievement Award Winner
- Three-time MHSAA D1 State Champion
- Wrestling USA High School All-American

Other Clinicians

- Matt Steintrager
- DCC Coaching Staff
- Former NCAA All-Americans

REGISTRATION FORM ON THE BACK

Registration Form

Participants Name: _____

Date of Birth: _____

Grade _____

Address: _____

Guardian's Name: _____

Emergency Phone #: _____

Email: _____

Liability Waiver

In consideration of Melvindale High School providing sponsorship and/or facilities for this program and/or Melvindale High School providing facilities, I hereby release and hold harmless and agree to indemnify Melvindale High School and/or Mitch Hancock and/or the DCC wrestling program and their employees, agents, and representatives from any and all claims, costs, damages, and liabilities for injuries or property sustained or caused by me or my ward while participating in any program offered by Melvindale High School. I understand that fees do not include accident or personal property insurance. I further understand that I am, or my child or ward is physically capable of participating in the program based upon consultation with my, or my child's or ward's personal physician.

Further, in the event of an injury, I hereby give permission and consent and authorize emergency first aid and/or hospital care or treatment fro myself and/or my child/ward if deemed necessary by qualified emergency or medical personnel or by said employees, agents, or representatives of Melvindale High School, and further agree to assume all expenses for said treatment.

Minor's Parent or Legal Guardian Signature

Date