2024 Black Hills Nationals Wrestling Clinic



Register at www.bhnationals.com Spearfish High School Wrestling Room, Spearfish, SD

THURSDAY, JUNE 6, 2024



Featuring . . .



Head Coach, Northern State University, 2015-Current

Assistant Coach, Northern State University, 2007-11 Graduate Assistant Coach, Northern State University, 2005-2007

- 2021 NSIC and NWCA Coach of the Year
- Coached 10 wrestlers to NCAA Division II National Tournaments
- Coached 2 NCAA All-Americans
- Coached one NCAA National Champion
- 2015 NWCA All-Academic Team
- 2014 Coached Aberdeen HS to State Wrestling Title
- 2015 SDHS Coaches Association Coach of the Year

REGISTER AT: WWW.BHNATIONALS.COM

DIRECTOR and STAFF:

Frank Pavich has been bringing quality Wrestling Camps and Tournaments to the Black Hills and Eastern Wyoming for the last 30 years. Our goal is to bring in top coaches to help wrestlers achieve their fullest potential.

ELIGIBILITY:

This camp is open to all wrestlers 6-18 male or female.

One Day Clinic COST and REGISTRATION: Register at www.bhnationals.com

- \$75.00 for all participants who pre-register online, online registration closes May 31st.
- \$100.00 CAMP FEE THE DAY OF THE CLINIC WALK-INS WELCOME.

SCHEDULE:

THURSDAY, JUNE 6, 2024

Check in 8:30a.m. - Clinic: 9:30a.m. - 11:45a.m. • Lunch will be provided 11:45a.m. - 12:30p.m. • Clinic 12:30p.m. - 3p.m. dismissal.

Misbehavior will not be tolerated. Inappropriate conduct may lead to immediate dismissal. All transportation, due to disciplinary action, is the responsibility of the parents.

		2024 Black H	ills Nationals Wrest	ling Camp ar	nd Tournament		
☐ 1 Day Clinic - \$75.00	Pre-Registration for	all participants who pre-	register online by May 31st				
☐ 1 Day Clinic - \$100.0	0 day of check-in	ONLINE REGIS	STRATION RECOMMEND	ED AT: www.bhr	ationals.com		
Name					Pho	one: ()	
						State	Zip Code
Weight Group	Age:	Grade:					
Nationals Wrestling Cam	authorize any first p. I/We understand	aid, medical treatment or that I/We will be respons	LLOWING INFORMATION, AN surgery deemed necessary in case ible for any expenses incurred on hon my/our behalf if I/We are not imm	of emergency for: (ful is behalf in connection	I name) with such treatment. I/We also	. a	participant in the Black Hills camp appointed physician to
Insurance Company			Policy Number	E	Emergency Phone Number	=	
camp facility, does so at h camper during the camp of forever exonerate and dis actions, present or future	is/her own risk. Spear or at the facilities. The charge Spearfish Hig whether the same be	arfish High School, Promo ne camper and his/her pare gh School, Promotions U ne known, anticipated, res	ust be signed by the camper's par- tions Unlimited LLC, Frank Pavich, are ent assume all responsibility for any Julimited LLC, Frank Pavich, and ulting from or arising out of the can try that would impair my performan	nd the camp staff shall r damages or injuries w d the camp staff from a nper's participation in	not be liable for any damage arisi hich may occur to the camper dany and all claims, demands, da the camp session and in the use	ing from person uring the camp amages, right o	al injury sustained by the session and so hereby fully and f action or causes of
I/We hereby consent to the Director has the authority			in	the Black Hills Nationa	als Wrestling Camp. If he fails	to obey the con	mpetition and camp rules, the
Camper's signature		Date	Parent's/Guardia	n Signature	Date		
INJURIES ARE A PART LESS LIKELY YOU WI	01 11111 111111111111	CITION IN TO A ELECT TIME	PORTANT THAT YOU ARE IN GO EIVE A MAJOR INJURY, YOU W		OU REPORT TO CAMP. THE I		

For more information please visit our website bhnationals.com or contact Black Hills Nationals Director, Frank Pavich at 605-641-0587.