

PINNACLE CLINICIANS

Possible Guest Clinicians Include:

John Fritz

NCAA D1 National Champion
Former Head Coach Penn State University

Jack Cuvo

2x NCAA DI National Champion
3x PIAA State Champion

Steve Harner

Head Coach Williamson Trade School
Head Coach Mid-Atlantic AAU Junior Olympic Team

Dale Bonsall

Head Coach Team Renegade
2x NCAA DI All-American

Tony Differ

PIAA State Champion
Junior Freestyle World Champion

Bernie Fritz

NCAA DI All-American
PIAA State Medalist

Mark Smith

PIAA State Pin Record
3x PIAA State Medalist

Bill Racich

Head Coach Ursinus College

Pete Schuyler

Head Coach Franklin & Marshall College
NCAA DI All-American

Morris Johnson

NCAA DII National Champion
Pan American Games Champion

PINNACLE STAFF

Jim Swiggard (Head Coach)

Head Coach Wissahickon High School
Franklin & Marshall College / Ursinus College
PIAA State Medalist
2x PA Freestyle National Qualifier
2x US Freestyle Northeast (Brockport) Regional Medalist
US Freestyle Northeast (Brockport) Regional Champion
AAU Junior Olympics All-American
PA Junior Duals Freestyle Team Member
PA Michigan Festival Freestyle Team Member

Pete Shoemaker (Assistant Coach)

Assistant Coach Wissahickon High School
Ursinus College
2x DE State Qualifier

Rich Kincade (Assistant Coach)

Former Assistant Coach Souderton High School
West Virginia University

Rich Gebauer (Assistant Coach)

Assistant Coach Wissahickon High School
Franklin & Marshall College
NJ State Medalist
EIWA Medalist
ACC Medalist
NJ Freestyle National Team Member

Jim Shoemaker

Assistant Coach Wissahickon High School
Ursinus College

INSURANCE WAIVER

I, _____ (name),
my parents and family hereby declare that as a participant in the Pinnacle Wrestling Club, I am joining at my own risk and of my own free will and that I will release and hold harmless Wissahickon, coaches, officers, or sponsors of Pinnacle Wrestling Club, for any injury that I may receive directly or indirectly for travel to or from or participating in the Pinnacle Wrestling Club. I also certify that the above mentioned, is protected by health or accident insurance which compensates me for expenses incurred as a result of any injury received through participation in the Pinnacle Wrestling Club. I hereby give permission to the representative of Pinnacle Wrestling Club to permit hospital personnel and/or a licensed physician to perform emergency treatment and inject or administer drugs in conjunction with such emergency treatment.

SIGNATURE OF WRESTLER

SIGNATURE OF PARENT/GUARDIAN

CLUB INFO

DAY: Tuesdays & Thursdays

TIME: 6:30-8:00PM

LOCATION: Wissahickon High School

AGE: Recommended grades 7-12

STYLE:

Freestyle

Scholastic/Folkstyle

Greco-Roman

MEMBERSHIP FEE:

Checks payable to: **Pinnacle Wrestling Club**

\$15 per session (MUST PROVIDE USA MEMBERSHIP CARD)

\$120 (MEMBERSHIP) + **\$30** (USA CARD)
= **\$150** per season (INCLUDES CLUB T-SHIRT)

\$120 (IF MEMBER PROVIDES OWN UP-TO-DATE USA CARD)

SEASON SCHEDULE:

APRIL 10—AUGUST 7

Sign-ups: April 10, 6:00pm

CONTACT: Jim Swiggard

2248 Old 40 Foot Rd.

Harleysville, PA 19438

Phone: 610-999-5542

Email: jaswiggard@yahoo.com

MAKE CHECKS PAYABLE TO:

Pinnacle Wrestling Club Inc.

REGISTRATION FORM

Name _____

Address _____

City _____

State _____ Zip Code _____

Home Phone # _____

School District _____

Age _____ Grade _____

Email _____

USA Card# _____

T-Shirt Size: S M L XL XXL

PINNACLE



WRESTLING CLUB

