

Camp Schedule

July 13th

Check-Ins: 3:00 PM-6:00 PM

1st Session: 7:00 PM-8:30 PM

July 14th

Breakfast: 7:00 AM-8:00 AM

2nd Session: 9:00 AM-10:30 AM

Lunch: 11:30-12:30 PM

3rd Session: 2:00 PM-3:30 PM

Dinner: 4:30 PM-6:00 PM

4th Session: 7:00 PM-8:30 PM

July 15th

Breakfast: 7:00 AM-8:00 AM

5th Session/Duals: 9:00 AM-
approximately 1:00 PM

What To Bring:

Sleeping bag, pillow, toiletries,
clothing, wrestling shoes & gear,
workout clothes, and a water
bottle

*Campers will be staying in the
school gymnasium.

*If you are not camping, bring
workout clothes, wrestling shoes
& gear, and a water bottle

Camp Directors

Shepherd Wrestling Coaches

Don Jenkins

Tyler Gilfeather

Lucas Logan

Questions can be directed to:

Don Jenkins

Cell: (406) 945-7900

Email:

donjenkins32@outlook.com

Cost To Attend

Early Bird (register by July 1st):

Camper \$125, Day \$100

July 1st-July 13th:

Camper \$150, Day \$125

Checks payable to:

Shepherd Wrestling Club

Mail payment & complete registration form to:

Don Jenkins

1835 Briarwood Blvd

Billings, MT 59101

2018 Mustang Wrestling Camp

July 13th-15th, 2018

Shepherd High School
Shepherd, Montana

Open to wrestlers
entering grades
5-12 in the fall of 2018

Camp Clinicians



Robert Stroh

**3x MT State Champion
4x MT State Placer**



Brandon Weber

**3x MT State Champion
4x MT State Placer
2017 NAIA Champion
2018 NAIA 2nd Place Finish
NAIA All-American**



Ben Stroh

**4x MT State Champion
2x NCAA Qualifier
2017 NAIA Champion
NAIA All-American**



Matt Weber

**4x MT State Champion
2016 NAIA 3rd Place Finish
2018 NAIA 2nd Place Finish
NAIA All-American**



Chris Nile

**2x MT State Champion
4x MT State Placer
NAIA All-American**

Registration Form

Name: _____
 Phone: _____
 Age & Grade (Fall of 2018): _____
 Weight: _____
 Parent(s) or Legal Guardian(s): _____
 Phone: _____
 Emergency Contact: _____
 Phone: _____
 T-Shirt Size (please circle one):
 Adult S Adult M Adult L Adult XL Adult 2XL Adult 3XL

Medical Release

I hereby authorize the staff of the Shepherd Wrestling Camp to act according to their best judgment in any emergency requiring medical attention. I, for myself and my child, hereby release and agree to hold harmless Shepherd Schools, its employees, and the directors and staff of the camp of and from all liability, claims, or causes of action from the illness, injury, or death of my child resulting from or incurred during my child's attendance at the camp/school.

Parent/Guardian Signature: _____
 Date: _____

Athlete Allergies, Medical Conditions, Etc.:

