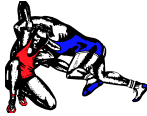


**THE GRANBY SERIES**

**TAKEDOWNS**

Learn...

- ◆ setups and finishes for the Sweep Single
- ◆ simple setups for the Inside Step and Russian Arm Series
- ◆ the Granby School's Front Head Lock Series
- ◆ our patented Iranian Series to successfully finish poor shots



**BOTTOM**

Learn...

- ◆ the Shoulder Granby, the hold that Billy Martin invented
- ◆ the Head Shrug, the basis building block on the bottom that can be executed from the ref position, sit-out, or change-over motion
- ◆ the Head Granby, the most powerful shrug from the bottom
- ◆ our patented Forced Roll series that finishes all bottom techniques with a sure five-point hold
- ◆ our Standing Rolls that can be easily incorporated with your stand-up series
- ◆ Tilt and leg defense



**TOP**

Learn...

- ◆ the Radman Ride and how it sets up the Arm Bar and Churella Tilts, Turks, and Cradles
- ◆ special techniques to stop the Stand-up, Switch, and all first holds off the whistle
- ◆ Tilt and leg defense

**At Session V a Coaches Meeting will be conducted on how to:**

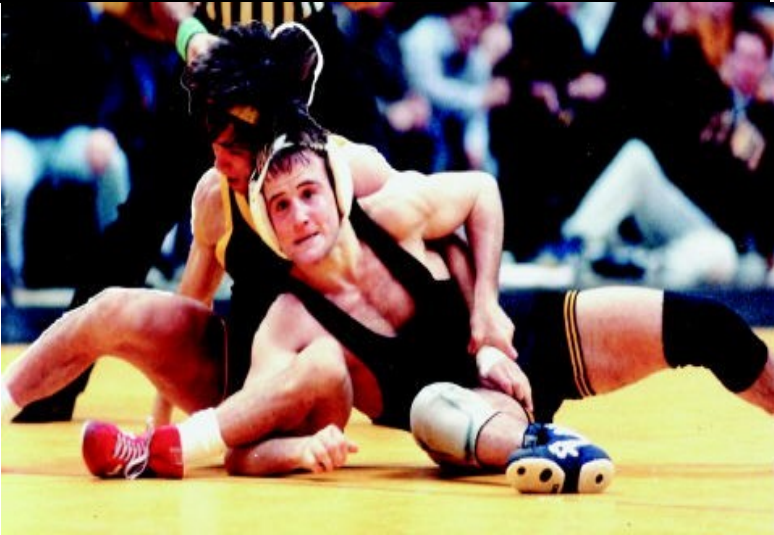
- \*\*Run a practice
- \*\*Conditioning
- \*\*Strength Training
- \*\*How to run and set-up a championship program from scratch
- \*\*Psychology

**\*A short video will be shown to illustrate that the technique shown at this clinic works in championship competition**

**\*A modified practice simulation will take place**

**\*Standing Granby competition will take place**

**The Martin's  
Granby School of Wrestling, Inc.  
Clinic  
2018**



**Site/Dates**

**\*Old Dominion University Wrestling Room  
4509 Elkhorn Avenue  
Norfolk, VA 23508  
July 9-11, 2018  
OPEN TO ANY AND ALL ENTRANTS**

**\*\*This camp is independently run and not  
a University Program\*\***

**[www.granbyschool.com](http://www.granbyschool.com)**

**Presented  
Granby  
School of  
Wrestling, Inc  
For More  
Information  
757-482-2177**

**Granby School of Wrestling, Inc.  
PO BOX 15265  
Chesapeake, VA 23328  
1-757-482-2177**

**July 9-11, 2018**

Photo Copies  
Accepted

Detach and Mail

**Granby School of Wrestling, Inc**  
**OPEN TO ANY AND ALL ENTRANTS**

**Application and Parental Permission**

Name \_\_\_\_\_  
Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
E-mail Address \_\_\_\_\_  
School \_\_\_\_\_  
Age \_\_\_\_\_ Weight \_\_\_\_\_  
Phone (    ) \_\_\_\_\_ Fax (    ) \_\_\_\_\_  
Coach \_\_\_\_\_ Grade \_\_\_\_\_  
Experience \_\_\_\_\_ Years \_\_\_\_\_

\_\_\_\_\_ July 9-July 11, 2018  
Location: Old Dominion Wrestling Room  
Norfolk, VA  
Deposit of \_\_\_\_\_ Check # \_\_\_\_\_

**\*\*Cost: \$240.00 for Clinic**

***Granby Camp @ ODU Commuter Camp***

***Monday July 9***

8:00-9:00 AM – Registration  
9:00-AM – 12:00 PM – Session I  
12:00-1:00 PM—Lunch on your own  
1:00-3:00 PM—Session II

***Tuesday July 10***

9:00 AM – 12:00 PM – Session III  
12:00 – 1:00 PM – Lunch on their own  
1:00 – 3:00 PM – Session IV

***Wednesday July 11***

9:00 AM – 12:00 PM – Session V  
12:00 – 1:00 PM – Lunch on their own  
1:00 – 3:00 PM – Session VI

TIMES ARE SUBJECT TO CHANGE

CASH, MONEY ORDERS, CASHIERS CHECK  
ACCEPTED ONLY ON SITE

**ENROLLMENT**

To enroll in the Granby Clinic you may pay in full or send a **\$100 non-refundable deposit** with your application. **Balance may be paid at registration by cash only. NO CHECKS WILL BE ACCEPTED 14 DAYS PRIOR TO REGISTRATION. ONLY CASH, CERTIFIED CHECK OR MONEY ORDER ACCEPTED AT REGISTRATION.** Early registration is encouraged. No wrestler will be accepted without a signed parental permission and waiver form. **Deposits are non-transferable.**

**Mail to: Granby School of Wrestling PO Box 15265, Chesapeake, VA 23328** Include **deposit** (check or Money order) of \$100.00 **payable to Granby School of Wrestling. Only CASH, CERTIFIED CHECK OR MONEY ORDER ACCEPTED AT REGISTRATION.** Upon receipt of deposit you will receive a confirmation letter. This form may be duplicated. Do not send form without parents signature.

Parents : Please read and sign

- 1) My son has permission to attend **Granby School of Wrestling, Inc.**
- 2) I have no knowledge of any physical impairment that would affect or be affected by my son’s participation in the **Granby School of Wrestling, Inc.**
- 3) I acknowledge that at camp my son will participate in a sport that will in volve physical contact of the body with other persons or objects including that mat where he may incur a risk of injury.
- 4) I specifically, fully and forever, waive and release the **Granby School of Wrestling, Inc.** its owners and staff from liability and claims for damages my son may sustain at camp and in his travel to and from said camp.
- 5) In the event of an emergency in which my son requires medical care, I authorize the staff of the **Granby School of Wrestling, Inc.** to obtain, for him, necessary medical treatment.

Drug Sensitivities \_\_\_\_\_  
Insurance Co \_\_\_\_\_  
Other Allergies \_\_\_\_\_  
Policy Number \_\_\_\_\_  
Emergency Phone Number \_\_\_\_\_

\_\_\_\_\_  
**Parent/Guardian Signature**

**GRANBY SCHOOL STAFF**



All of our staff members are master teachers.

The majority of the staff coach at  
  
the high school level in championship programs.

The remaining portion of our staff are competing

In college at Old Dominion University or wrestle

For several Division I Universities throughout the

Nation. All are products of the Granby School and

Excellent teachers.

**Granby Commuter Camp**

Contact: Steve Martin  
Phone: 757-373-6177  
Email: smartin@odu.edu

Contact: Mike Dixon  
Phone: 812-219-8780  
Email: mjdixon@odu.edu