

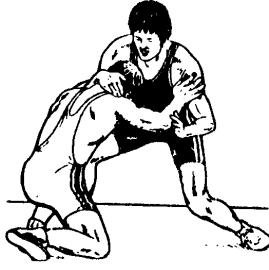
WAUKESHA WRESTLING CLUB

T-SHIRT RECEIVED _____
SIZE _____
DUES PAID DATE: _____
CHECK # _____
CASH _____
SINGLET DEPOSIT _____
PROOF OF BIRTH DATE PROVIDED FOR FILE: YES / NO

T-Shirt Size (circle one)

Adult: S M L XL XXL

Youth: S M L



2010

FEES: \$85
 (INCLUDES \$35 USA CARD AND CLUB T-SHIRT)

Child's Name _____ USA Card No. _____

Birthdate _____ Height _____ Weight _____ Years Experience _____

Special Medical Concerns _____

Name of School _____ Grade: _____

Parent(s) _____

Address _____ City _____ Zip _____

Phone #'s _____

E-mail _____

Doctor's Name _____ Doctor's Phone _____

Name & Phone of Emergency Contact (not living with you) _____

**PARENTAL/GUARDIAN WAIVER, ASSUMPTION OF RISK, RELEASE FROM LIABILITY,
 AND REQUEST FOR EMERGENCY MEDICAL ADMINISTRATION**

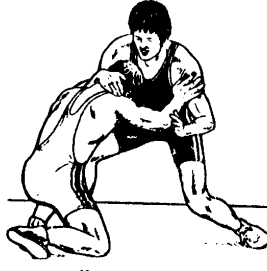
As parent or guardian, I give my permission for _____ to participate in the Waukesha Wrestling Club for the 2010 season, and for and in consideration for the opportunity for my child to participate in the above-named activity/ activities offered by the Waukesha Wrestling Club I hereby authorize my child to participate in said activity and hereby release and waive any claim, demand, cause, action, assertion or liability against the Waukesha Wrestling Club, and its officers, coaches, volunteers, and chaperones, for any and all injuries, losses or damages suffered by myself or my child as a result of my participation or my child's participation in this activity/activities.

Further, if emergency medical attention is needed by my child during or resulting from said activities, I authorize any of the coaches, volunteers or chaperones to authorize any Emergency Medical Technician, licensed physician or surgeon to administer such emergency medical attention. I understand that this waiver, assumption of risk, release from liability, and request for emergency medical administration includes any claims based on negligence, action, or inaction of the above parties. I accept full responsibility for the cost of treatment for any injury, losses, damages or death suffered by myself or my child while taking part in these activity/activities or as a result of either of us taking part in the activity/activities.

Signature of Parent/Guardian _____

Date _____ **Relationship to Child** _____

WAUKESHA WRESTLING CLUB



KINDERGARTEN THROUGH 8TH GRADE WELCOME!
(for wrestlers in the Waukesha School District only)

Wrestlers are welcome to sign-up at anytime during the season.

FEES: \$85 (INCLUDES \$35 USA CARD AND CLUB T-SHIRT)

Deduct \$5 per child for multi-child family discount
PLEASE MAKE CHECKS PAYABLE TO: WAUKESHA WRESTLING CLUB

*****A PARENT OR GUARDIAN SIGNATURE IS REQUIRED AT SIGN UP.*****

USA Wrestling and the Wisconsin Wrestling Federation require proof of your child's birth date. Please provide a photocopy of your child's birth certificate at sign up to keep on file with the Club. (If you are a returning club member and have filed a birth certificate with the club, there is no need to file a duplicate copy.)

PRACTICE SCHEDULE

MONDAY AND WEDNESDAY EVENINGS

JANUARY 4, 2010 – MARCH 24, 2010

WAUKESHA NORTH HIGH SCHOOL (GYM BALCONY)

6:30 P.M. TO 7:15 P.M. – KINDERGARTEN THROUGH 5TH GRADE

6:30 P.M. TO 8:00 P.M. - 6TH THROUGH 8TH GRADE

(PRACTICE WILL NOT BE HELD IF WAUKESHA SCHOOLS ARE CLOSED FOR ANY REASON)

IMPORTANT REMINDERS

- Changing facilities are not available, so please be dressed and ready to wrestle. (shorts and t-shirts are appropriate)
- PLEASE KEEP STREET SHOES OFF THE MATS. Gym shoes or wrestling shoes should not be worn outside prior to practice. Change into them mat-side. It is important to keep the mats clean.
- Keep finger nails trimmed and leave jewelry at home.

Please remember that we are guests at the school.

The Waukesha Wrestling Club is entirely a volunteer organization and we are not sponsored by the School District. Let's respect the facility and stay in the designated practice area, which is the balcony area only. We ask that parents/guardians help us keep an eye on the wrestlers and siblings of wrestlers during practice.

WWW.WAUKESHAWRESTLINGCLUB.ORG