

Valentine Wrestling Club

2010 Club Registration

Fee: \$35 per wrestler, \$25 per sibling, \$25 singlet (\$20 returned when singlet returned)

Wrestler's Name _____ Date of Birth _____

Number of years experience _____ Weight _____ Age _____ Grade _____

Parent/ Guardian Name _____

Address _____

Telephone Numbers: Mother: Home: _____ Work: _____ Cell: _____

Father: Home: _____ Work: _____ Cell: _____

Please indicate another person to contact in the event of an accident and we are unable to reach you:

_____ Phone #: _____

Insurance Company _____ Policy Number _____

Is your child presently on medication? (If yes, please list medication(s): _____

Drug Sensitivities _____

Other Allergies or Medical Concerns _____

Volunteering is vital to the success of our wrestling program. It is important that all parents volunteer in some way. Please indicate below how you would be willing to help the Valentine Youth Wrestling program. Check all that apply.

Valentine Tournament

____ Set-up ____ Score Keeper ____ Time Keeper ____ Seeding ____ Weighing
____ Concessions ____ Door Entry ____ Walk-ins __X__ Clean-up

Please read the alternative statements below and sign under the one that you choose.
DO NOT SIGN MORE THAN ONE!

1. If my child needs medical attention, it is my wish that I be contacted before any medical procedures are done on my child, unless immediate treatment is necessary to save my child's life or prevent permanent injury. **I also understand that I must be at every practice my child participates in or he cannot participate.**

Signature of Parent/Guardian _____ Date _____

2. If my child needs medical treatment while participating, it is my wish that the treatment be begun while efforts are being made to contact me. So that treatment is not delayed, I consent to any medical procedures that the physician believes needed, on the understanding that efforts will continue to be made to contact me. I accept responsibility for all costs related to such treatment.

Signature of Parent/Guardian _____ Date _____

Singlet # _____ Size _____ Check # _____ Amount _____