RAM WRESTLING CLUB REGISTRATION FORM

Name of Child:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Name of Parent:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age of Child:\_\_\_\_\_\_ Grade:\_\_\_\_\_\_\_\_Parent’s Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Included Participant T-shirt: YS(5/6) YM(10/12) YL(14/16) AS AM AL XL XXL

Extras:

T-shirt ($12): YS YM YL AS AM AL XL XXL($14)

**Hoodies:** Adult sizes($25) Youth sizes($22) **Sweat Pants:** Adult sizes($25) Youth sizes($20)

Hoodie Size:\_\_\_\_\_\_\_\_\_\_ Sweat Pant Size:\_\_\_\_\_\_\_\_

Registration Fee ($60) Cash\_\_\_\_\_\_ Check\_\_\_\_\_\_

Send Payment to Travis Bell 1800 Bench Road Pocatello, ID 83201

Make Checks Payable to Highland Wrestling

**Payment due by Feb 9 or a $10 late fee will be applied**

Travis Bell (208)530-0293 Kolby Cordingley (208)547-7328

Ram Wrestling Club

Waiver and Release from Liability

Personal Insurance Requirement

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(parent or guardian), the undersigned, on behalf of myself, my heirs and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter “Releasors”) hereby forever release, discharge and covenant not to sue Highland High School, School District #25, the Ram Wrestling Club, USA Wrestling Association, their insurers, administrators, agents, or coaches (all hereinafter “Releasees”) from any and all liabilities, claims, demands, causes of action or losses of any kind or nature for personal injury arising out of participation in Ram Wrestling Club activities.

Releasor understands and acknowledges that wrestling activities in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. Releasor expressly and voluntarily assumes all risk of personal injury sustained while participating in activities associated with the Ram Wrestling Club.

Releasor acknowledges and herby certifies that I do have personal home health and accident insurance which would adequately cover personal injury for my child while participating in Ram Wrestling Club activities and I shall assume full financial responsibility for any personal injury of my child while participating in Ram Wrestling Club activities and I shall not expect or request any financial aid from any Releasees associated with the Ram Wrestling Club.

Parent Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Particpant’s Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Insurance Company:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Policy No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_