

### Washington Y Wrestling Club Registration Kindergarten – 6<sup>th</sup> Grade

Mail in: by October 24, 2014

WHO:	Boys and girls in K-6 <sup>th</sup> grade in the Warren Hills Regional sending district (Washington Township, Washington Borough, Franklin, Mansfield, and Oxford)
WHEN:	Varsity/JV scheduled to begin Tuesday November 4th. Novice (1 <sup>st</sup> & 2 <sup>nd</sup> Year) scheduled to begin Monday November 3rd. Practices will be held in Warren Hills Regional High School wrestling room 6pm -8pm.
COST:	\$60 for the first family member, \$40 for each additional family member. Mail completed, signed applications with check or money order payable to "Washington Y Wrestling"
INCLUDE:	A <u>copy of each child's birth certificate</u> (unless a copy is already on file with Washington Y Wrestling) to:
	Washington Y Wrestling Club
	6 Glen Eagles Rd.
	Washington, NJ 07882
Questions?	Contact Mike DeGeorge at (908) 797-3977 or via email at <u>washingtonywrestling@gmail.com</u>

The Washington Y Wrestling Club is always looking for volunteers to help with our program. Even if you don't know anything about wrestling, we have qualified people who would love to share their knowledge. Positive beginnings mold our children's futures. What could be more positive for your child than having you share in their childhood wrestling experience?

\$5 of your registration fee is given to the Warren Hills Wrestling Club to support your membership in the club . The Washington Y is supported through the club and your membership is critical in promoting the sport in our community. Please make every effort to attend monthly meetings and support our sport. Questions about the Warren Hills Wrestling Club? Please see our website : http://www.warrenhillswrestlingclub.com



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#### 2014-2015 Work Bond Information

New for this season, Washington Y will require that parents give a \$100 check as a deposit for their work bond/equipment check. The check is kept UNCASHED until the end of the season. If at the end of the season you complete your requirements and you return your equipment in the condition in which it was issued, THEN your check will be returned to you at the end of the season. If you do not complete these tasks or there are any outstanding debts to the organization your check will be cashed! The registration WILL NOT be completed without the deposit check.

# **Work Bond Requirements**

Each FAMILY is required to complete a minimum of (2) food donations and a minimum of (1) two hour shift of your time. Food donations will be used to sell at the concession stand during home matches. Examples of time shifts will be: score table, concession stand, admission. A more specific list will be provided prior to the first home match.

# Work Bond Signups

We will be using VolunteerSpot to sign up for work bond assignments this year.



Registration Information				
Payment Method:	Check	Check #:	Wrestler Level: (Must have at least 2 years novice experience to be considered for JV/Varsity)	<ul><li>Novice</li><li>JV/ Varsity</li></ul>

Demographic Information Please Print Clearly							
Childs Name:		Pa	rents Names				
Street Address:		Cit	y:	State		Zip	
Telephone #	Home:	Ce	II 1:	Cell 2		Wo	ork:
Email(s)							
Date of Birth		School:			Grade:		
Weight:		Shirt Siz	· · ·				rovided/On
		Shint Size;			File? 🏾 Yes 🗖 No		lo
I, AS A PARENT OR LEGAL GAURDIAN APPROVE OF MY CHILD'S ATTENDANCE AND ASSUME ALL RISKS AND HAZARDS INCIDENTAL TO SUCH PARTICIPATION ARISING OUT OF ANY AND ALL ACTIVITIES, WHETHER THE RESULT OF NEGLIGENCE OR ACCIDENTAL. I, THE UNDERSIGNED INTENDING TO BE LEGALLY BOUND, HEREBY WAIVE, RELEASE, ABSOLVE, INDEMNIFY FOR MYSELF, MY HEIRS, EXECUTORS, AND ADMINISTRATOR ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES AND ANY OTHER ACTIONS WHATSOEVER, WHICH I MAY HAVE AGAINST THE WARREN HILLS SCHOOL DISTRICT, THE WASHINGTON Y, ALL COACHES, STAFF, DIRECTORS, AND SPONSORS. I VERIFY THAT I HAVE FULL KNOWLEDGE OF THE RIGORS OF THE SPORT AND RISKS INVOLVED IN PARTICIPATION. I AGREE TO RETURN THE UNIFORMS AND ANY EQUIPMENT ISSUED TO MY CHILD IN AS GOOD CONDITION AS ISSUED EXCEPT FOR NORMAL WEAR AND AGREE TO PAY REPLACEMENT COST BEFORE OUR CHILD WILL BE ELIGIBLE FOR PARTICIPATION (SINGLET \$45.00).							
Print Name:		Signatu	re:			Date:	
Emergency Permission & Information							
My Child is covered under a n accidental/hospital insurance policy?			Yes	Carrier:			
			No	Polic	y #:		
Heenitel				1	Energy and an		

Hospital:		Phone:	Emergency	
	,		Name	Phone
Physician:		Phone:		
Dentist		Phone:		

PLEASE CHECK BELOW – PARENT PARTICIPATION IN AT LEAST ONE OF THE FOLLOWING IS EXPECTED FOR YOUR CHILD'S PARTICIPATION IN THE WASHINGTON Y WRESTLING CLUB			
🗖 Team Parent	Concessions/Shopping		
Fundraising	Admission		
🔲 Set Up / Clean Up	Statistician		
Coaching	Scoring - Timekeeping - Table Help		
*** Washington Y Wrestling is not affiliated with the Warren Hills Regional School District or elementary sending districts			

Washington Y Wrestling 2014 – 2015 Registration Form