

# Mat Sports Youth Wrestling Clubs

Predator Wrestling & Novato Christian Wrestling

## Primary Adult/Legal Guardian Information (Please Print)

1 <sup>st</sup> Adult – First/Last Name:	2 <sup>nd</sup> adult – First/Last Name:
Street:	Home Telephone:
City:	Business Telephone:
State/Zip:	Cell or Pager#:
E-mail Address:	

### Participant Information

First Name	Last Name	DOB	Male/Female	Special Needs or Health Concerns
Name of School:			Grade	
First Name	Last Name	DOB	Male/Female	Special Needs or Health Concerns
Name of School:			Grade	

### Registration Fee

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| <ul style="list-style-type: none"> <li>• #includes two classes per week, except holidays and a few coaches days off per season. September 2009 through June 2010.</li> </ul> | <ul style="list-style-type: none"> <li>• Does not include AAU Membership, tournament fees, wrestling shoes, or other accessories.</li> </ul> |
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### Payment by check or money order made payable to "Mat Sports"

Full payment \$ .00	\$
Monthly \$ 5.00	
Sponsorship Requested    Yes/ No ..... Full or Partial	\$
<b>Total</b>	<b>\$</b>

### Release of Photographs and Video

For valuable consideration, the undersigned understands and agrees that photographs and video may be taken during practices and matches and hereby gives permission to have his/her photo taken and authorizes the use and reproduction of said photos by Mat Sports. All negatives and prints shall become the sole property of Mat Sports.

Signature of Parent or Guardian	
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### Received and Signed – Liability Waiver & Medical Treatment Consent Forms

Signature of Parent or Guardian	
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