

Philosophy

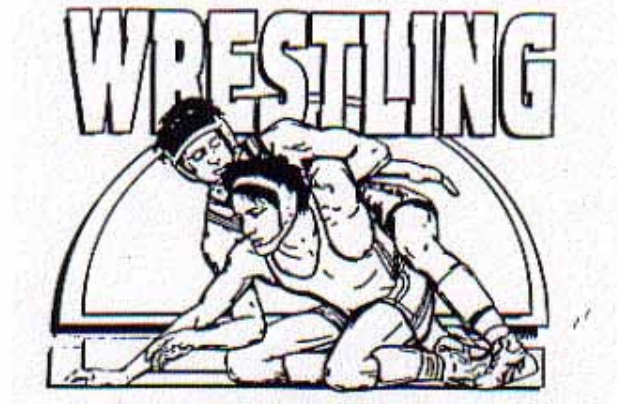
Our youth program is designed to introduce boys (grades 1-6) to the sport of wrestling. The program is designed to create a positive and structured learning environment for youth wrestlers. Participants will be exposed to the sport through basic fundamentals and drills appropriate for the age group. There will be an emphasis on fun and participation through drilling, practicing, and live wrestling situations. Youth Wrestlers will have opportunities to attend local tournaments as a team.

Fun and Fundamentals

- Basic Stance & Takedowns
- Top & Bottom Position
- Basic Riding & Pinning
- Escapes & Reversals
- Safety (On & Off the Mat)
- Wrestling Games

All you need are shorts, t-shirt and sneakers! Wrestling shoes and headgear are optional.

ALL PARTICIPANTS GET ENTRY TO WRESTLE IN
THE
6th Annual Penfield Youth Tournament –
Saturday March 6, 2010



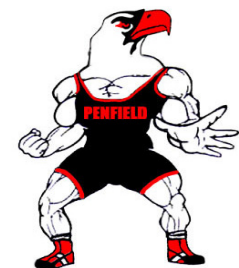
A true measure of a champion is not their wins and losses
but by how they handle and what they learn from each
one.

www.penfieldwrestling.com

PENFIELD



Winter Session
Tuesdays & Thursdays
5:30 pm - 7:00 pm
January 5 – February 11
Make up dates 2/23 & 2/25
Grades 1-6
PHS East Gym Small Side



Registration

Penfield Recreation Information
Mail/drop-off registration form (on right) with
payment to:

Penfield Recreation,
1985 Baird Road, Penfield, NY 14526
Register Online beginning 12/1/09 at
www.penfield.org

Cost \$50.00 - Non-resident registration will be
accepted after 12/15 - space providing.

includes a Penfield Youth Wrestling T-shirt
and entry into

Penfield's 6th Annual Youth Wrestling Tour-
namment
Saturday March 6, 2010

Coaching Staff

Scott Kropman—Youth Development Coach
(585) 734-1930
wrestling@penfieldwrestling.com

Ed Porto—Bay Trail Wrestling Coach
(585) 662-5751
edward_porto@penfield.monroe.edu

The Penfield JV/Varsity Staff and
wrestlers will also assist with the program.

Note:

*The Town of Penfield does not carry
medical insurance for program partici-
pants. All policies and procedures found
in the Penfield Recreation 2010 Winter
program brochure are in effect.

(PLEASE PRINT)

Recreation Registration Form

(*Fill out form completely including signature*)

PARTICIPANT NAME _____ SEX ____ DOB ____ / ____ / ____ AGE ____
ADDRESS _____ CITY _____ ZIP _____
HOME PHONE _____ WORK PHONE _____ Ext ____ E-MAIL ADDRESS _____

Resident of Penfield or Penfield School Dist.	
Yes	No

If Participant Under The Age of 18, Please Complete The Following Shaded Area:

PARENT NAME _____	DAY PHONE # _____	RELATIONSHIP (Mom/Dad) _____
2ND PARENT NAME _____	DAY PHONE # _____	RELATIONSHIP _____
SCHOOL THAT CHILD IS ATTENDING _____	GRADE _____	

Please list all courses which you wish to register for:

Program Name (First Choice)	Course # (including section)	Program Fee	IF COURSE IS FULL, YOUR 2ND CHOICE
1) _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	\$ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
2) _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	\$ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>
3) _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>	\$ _____	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/>

TOTAL AMOUNT ENCLOSED \$ _____

WAIVER FOR PARTICIPATION

- IN CONSIDERATION OF YOUR ACCEPTING MY ENTRY, AND UNDERSTANDING THAT A CERTAIN AMOUNT OF RISK IS INHERENT TO SOME RECREATIONAL PROGRAMS, I HEREBY, FOR MY CHILD, MY HEIRS, EXECUTORS, AND ADMINISTRATORS, WAIVER AND RELEASE ANY AND ALL RIGHTS AND CLAIMS FOR DAMAGES I OR MY CHILD MAY HAVE AGAINST THE TOWN OF PENFIELD AND ITS REPRESENTATIVES, SUCCESSORS, AND ASSIGNS FOR ANY AND ALL INJURIES SUFFERED BY MYSELF OR MY CHILD AT ANY ACTIVITY SPONSORED BY THESE GROUPS. FURTHERMORE, IN THE EVENT A REFUND IS GRANTED FOR MYSELF OR MY CHILD FOR WHATEVER REASON WITH THE ABOVE STATED ACTIVITY, I DO HEREBY AUTHORIZE THE TOWN OF PENFIELD TO EXECUTE A REFUND VOUCHER ON MY BEHALF AND SUBMIT FOR PAYMENT UNDER THE TERMS AND CONDITIONS SET FORTH IN THE TOWN OF PENFIELD REFUND AND REGISTRATION POLICY. REFUNDS ARE SUBJECT TO A PROCESSING FEE.

SIGNATURE **X** _____

{PARENT/GUARDIAN/SELF (IF OVER 18)}

PLEASE LIST ANY ADDITIONAL INFORMATION HERE (e.g. Special Needs/Medical Notes/Requests/Other):

Check payable to:
"Penfield Recreation"



VISA / MC / DISC Exp. Date ____ / ____ Account # _____

Cardholder's Name: _____ Authorized Signature _____