

# GENESEE VALLEY WRESTLING CLUB

## 2021 REGISTRATION FORM



### ***FREESTYLE / GRECO ROMAN / FOLKSTYLE***

**MARCH 1 - JULY 31 TUE/THR 7pm 8244 State St, Batavia, NY 14020  
GRADES 7-12**

Wrestler name: \_\_\_\_\_

Address: \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

USA Card # \_\_\_\_\_

Parent Information:

Names: \_\_\_\_\_

Phone numbers: \_\_\_\_\_

Please circle the mobile phone number(s) you would like to use for the *Heja* app.

Email(s): \_\_\_\_\_

Fees: \$125 Full Session March-July \_\_\_\_\_ OR \$30 Monthly \_\_\_\_\_

PLEASE MAKE CHECK OUT TO: Genesee Valley Wrestling Club or

Venmo payment to @Rick-Stewart-29

By signing this application, I recognize that participating in this activity has a certain amount of risk and injury is always possible. I agree to allow my child to be treated by a physician, nurse, or a certified health professional while participating in Genesee Valley Wrestling Club practices, events, tournaments and other activities. I understand that the wrestlers attending this club are using the facilities at their own risk. I understand and agree that the club directors, coaches, club staff, and anyone associated with or connected with the club, are not liable and do not assume liability for accidents, injuries, personal property damage, skin infection, sickness, medical or dental expenses incurred by my son or daughter during their membership with Genesee Valley Wrestling Club.

Parent/Guardian Name (print) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Guardian Signaure \_\_\_\_\_