

Jr. Red Raider
Youth Wrestling Club

"You're always a champion when you choose to compete"

DO YOU WANT TO GET FASTER OR STRONGER?
JOIN FAIRPORT YOUTH WRESTLING
All levels of experience welcome!

Beginners: Coaches will design practices to focus on improving strength, conditioning, speed and agility while introducing the foundation to wrestling.

Advanced: Experienced wrestlers will have the opportunity to focus on more advanced wrestling techniques, with the goal to prepare for matches and competitions.
Practice:

Each child will be given the opportunity to practice up to 2 to 3x per week.

Our practices will take place weeknights. A complete practice schedule for the season will be put on our website as soon as we have it.

Most practices will be held between 6:00 and 7:45 pm.

Season runs from late November thru March.

Cost per wrestler \$100 (*Max cost per family is \$210*)

Included in the cost each team member will receive a team T-shirt, a trophy, and a year end party.

Competition: Coaches and the Fairport Jr. Red Raider youth wrestling club will be organizing participation in weekend tournaments for interested team members.

See reverse for sign up

For more information contact:

Phil Provenzano

585-355-8196

provo50@hotmail.com

Brad Rosenbaum

585-750-4199

bradleyj.rosenbaume@gmail.com

Child's Name: _____
Age/Grade: ____/____ Male Female Birthdate: _____
Daytime Phone: _____ Evening Phone _____
Street Address: _____ City: _____ Zip: _____
T-Shirt Size (Circle one): Youth small (6-8) Youth medium (10-12)
Youth large (12-14) Adult Small Adult medium Adult large

Child's Limitations or Cautions: _____
Special Requests (requests are not guaranteed): _____

Parent/Guardian Names: _____
Email Address: _____

Emergency Contact (Other than household): _____
Phone: _____

Release: I hereby release the Fairport Jr. Red Raider Youth Wrestling Program and any of its coaches from any responsibility or liability in connection with this activity. I give permission to a licensed physician or other hospital staff members to carry out emergency medical care deemed necessary to my child when normal permission is unavailable. I certify that my child (child's name _____) is in good physical health and shall have no limitations other than those I have specifically named on the registration form which may predispose him/her to risk during this program. I fully understand that the Fairport Jr. Red Raider Youth Wrestling Program does not provide accident insurance.

Parents Signature Required _____

Please Remit Registration Form and \$100 payment to:

Fairport Youth Wrestling Treasurer, Tina Provenzano

14 Dona Lea, Fairport, Ny 14450

Please make checks payable to Fairport Youth Wrestling Booster Club

OR Venmo at @fairportnyyouthwrestling

Please make sure you add child's name in notes when using Venmo..

This event, activity, or program is not sponsored by the Fairport Central School District. Approval does not imply endorsement, but is a courtesy service to the community.