

# **EAGLE WRESTLING CLUB**

The Eagle Wrestling Club (EWC) is embarking on its Fifth annual winter wrestling season for boys and girls ages 5-14. The season begins December 4<sup>th</sup>, 2007 and ends in February 2008. Children will be grouped by age, weight and experience. Everyone participates. Children learn at their own pace. EWC wrestlers will have the opportunity to participate in open youth invitational wrestling tournaments throughout Monroe County.

## Program Details

- Where?** The **EAGLE WRESTLING ROOM** at the Irondequoit High School
- Equipment.** Club Members must wear gym shorts, athletic pants or sweats and t-shirt. No buttons or zippers. Wrestling shoes recommended, but not required.
- Requirements** Personal Medical insurance.
- When?** Sessions begins December 4<sup>th</sup> and ends in February. Practice is Tuesdays and Thursdays, 7:15-8:15 PM. We realize most athletes will not be able to attend every session but we hope for exceptional attendance.
- Cost** **\$50. (90 for 2 family members)** Includes EWC T-shirt, and entrance into the EWC youth Wrestling Club tournament.
- How to register** Sign up in person on **Tuesday November 27<sup>th</sup> 7:30PM** at the **Connorton Gym / Eagle Wrestling Room, Room 2085**, Second Floor Irondequoit High School. Or send your completed information form and a check made payable to **Irondequoit Wrestling** at the following address;

Keith Jarrell  
444 Barry Rd  
Rochester NY 14617

**Registration is limited to 45 participants. Register early.**

## Information Form

Insurance information will be handed out your first night of the season, which will require parent or legal guardian signature.

Name \_\_\_\_\_ School Grade \_\_\_\_\_

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

City/Town: \_\_\_\_\_ ZipCode \_\_\_\_\_

Home Phone: \_\_\_\_\_ Emergency Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Shirt Size YS, YM, YL, AS, AM, AL

EMAIL Address \_\_\_\_\_

I (**PLEASE PRINT**, Parent or Guardian) \_\_\_\_\_ do hereby assume all risk and hazards incidental to the conduct of this youth wrestling program. I further release, absolve, indemnify, and hold blameless the Eagle Wrestling club and the West Irondequoit School district, and all personnel associated with its operation.

In addition, I(Parent or Guardian signature) \_\_\_\_\_ confirm that my child has **medical insurance** and will be responsible in full for the welfare of the above named child.

Visit [www.armdrag.com](http://www.armdrag.com) for the most updated information for Wrestling in Monroe County.