



TREVIAN WRESTLING CLUB

2009-2010 REGISTRATION FORM

ABOUT THE CLUB

- No experience necessary
- Open to all 2th - 8th graders – BOYS and GIRLS
- Athletes will learn wrestling moves, techniques and rules
- Meet new people, develop teamwork and self-discipline
- Improve strength, agility and fitness
- Wear shorts, t-shirt and wrestling shoes and head gears
- All athletes will have the opportunity to wrestle matches and in tournaments
- Club members will be introduced at a New Trier home varsity wrestling meet
- Coached by Marc Tadelman (Varsity coach at New Trier) and Mike Clough assistant coach New Trier.
- Competition schedules and tournament information will be announced. Check the *Trevian Wrestling Club* web site for updated information (www.trevianwrestlingclub.com)

IMPORTANT INFORMATION

- Parent Meeting and Registration is on Thursday, October 8th at 7:00pm, at the New Trier Winnetka Campus Wrestling room, located at the east entrance by the tennis courts off of Essex Rd.
- Practices are in the wrestling room on the east campus and begin on Monday, October, 26th, 6:00-7:45pm. PRACTICE IS ALWAYS ON Mondays and Wednesdays.
- Cost is \$350 and includes membership to the Illinois Kids Wrestling Federation (IKWF), insurance, instruction, t-shirt and entry to 6 tournaments and all dual meets.
- New members MUST provide a copy of their wrestler's birth certificate
- Athletes are responsible for wrestling shoes and headgear.
- All members will have the opportunity to buy *Trevian Wrestling Club* gear if desired (sweatshirts, jackets, winter hats, singlets)

Questions? Contact Marc Tadelman at tadelmam@newtrier.k12.il.us. (847) 612-9765

MEMBERSHIP APPLICATION

<p>Name _____</p> <p>Age ____ Birthdate _____ Grade _____</p> <p>Approximate weight _____</p> <p>T shirt size _____</p> <p>Address _____</p> <p>City _____ Zip _____</p> <p>Home Phone _____</p> <p>School _____</p> <p>E-Mail _____</p> <p>_____</p> <p>Parent(s)/Guardian Names</p> <p>_____</p> <p>Emergency Contact Name</p> <p>_____</p>	<p>Please bring a check made payable to Trevian Wrestling Club to the <i>mandatory</i> Parent meeting on Thursday, October 8th, 2009. If you cannot attend, please e-mail Marc Tadelman at tadelmam@newtrier.k12.il.us.</p> <p>The cost of this club program includes instruction, t-shirt, insurance and membership in the Illinois Kids Wrestling Federation (IKWF) and entry fee for 6 Tournaments.</p> <p>REQUIRED UPON REGISTRATION: Please complete the waiver provided and attach to your check and registration form.</p> <p>Thank you, and let's have a great 2009-2010 wrestling season!</p>
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**RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT
WITH PARENTAL CONSENT ("AGREEMENT")**

IN CONSIDERATION of being permitted to participate in any way in any event ("Activity") at any time during the current calendar year I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if, at any time, I believe the conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) THIS ACTIVITY INVOLVES RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS or SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation ,or that of the minor, in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the sanctioning organization(s), their administrators, directors, agents, officers, members, volunteers, and employees, other participants, officials, rescue personnel, sponsors, advertisers, owners and lessees of Premises on which the Activity is conducted, (each of the forgoing shall be considered one of the RELEASEES herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I ACKNOWLEDGE THAT I AM OVER THE AGE OF 18 YEARS, HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE, AND I INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: _____

PARTICIPANT'S SIGNATURE: _____

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____ DATE: _____

Below section must be completed by Parent/Guardian for any participant under the age of 18

MINOR RELEASE

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF THE ACTIVITY AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEE'S FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIMS AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR ANY COST THAT MAY OCCUR AS A RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: _____ I HAVE READ THIS RELEASE

PARENT/GUARDIAN SIGNATURE (only if participant is under the age of 18): _____ I HAVE READ THIS RELEASE

ADDRESS: _____
(Street) (City) (State) (Zip)

PHONE: _____ DATE: _____