

# Thorobred Wrestling Club

6100 W. Gila Springs Pl, Suite 1  
Chandler, AZ 85226  
www.thorobredwc.com

**Black Team** Practices Mon/Wed, 6:00pm-7:30pm, Thurs 6:30pm-8:00pm

**Red Team** Practice Tues & Thurs 5:30pm - 6:30pm

**Elite** Tues Invite Only 6:30pm-8:00pm

**\*New 2016-2017 Sunday Scrap 11:30am-1:00pm (Invite Only)**

**Season Dates October 26<sup>th</sup>, 2016 - June 15<sup>th</sup> 2017 - Folkstyle, Freestyle, Greco**

## INSTRUCTIONS FOR REGISTERING -

In order to process your registration, we must have parent/guardian signatures on all forms.

**Club Fees: Red Team (beginners) - \$450 Black Team (advanced) - \$725 \*\$35 Sibling Discount**

**USA Wrestling Card** - \$35 per wrestler (valid August through August) Purchase card @ [www.usawmembership.com](http://www.usawmembership.com)

Team Manager: Lesley Eviston - (916) 612-1722 / Coach: Mike Douglas - (480) 612-3380 / Coach: Jack Cardinal - (602) 350-4488

### Wrestler(s) Information

Wrestler #1 Last Name, First Grade '16-'17 Birth date Years of experience Photo  
Team Weight Division Current School USA card #

Wrestler #2 Last Name, First Grade '16-'17 Birth date Years of experience Photo  
Team Weight Division Current School USA card #

Wrestler #3 Last Name, First Grade '16-'17 Birth date Years of experience Photo  
Team Weight Division Current School USA card #

### Parent/Guardian Information

first name last Home Phone Cell. Phone Child's Mailing Address  
first name last Home Phone Cell. Phone City State Zip  
Emergency Contact relationship Phone Alt. Phone

**E-MAIL**

**E-MAIL**

\* **REQUIRED. ALL info is sent via email. Please check weekly for updates**

**Appropriate gym clothes MUST be worn or kids will not be permitted to practice. Wrestling shoes are required.**

## READ THE FOLLOWING CAREFULLY & SIGN BELOW (Parent /Legal Guardian Signature REQUIRED)

In consideration of being allowed to participate in any way in the Thorobred Wrestling Club and related events and activities, the undersigned: Agree that before participating, they each will inspect the facilities and equipment to be used, and if they believe anything to be unsafe, they will immediately advise their coach or supervisor of such condition(s) and refuse to participate. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability, and severe social and economic losses which might result, not only from their own actions, inactions or negligence, but the actions, inactions or negligence of others, the rules of play or condition, of the premises or of any equipment used. Further that there may be other risks not known to us or not reasonably foreseeable at this time. Assume all foregoing risks and accept personal responsibility for the damages following such injury, permanent disability or death. Further, assume all liability for the negligence if participant leaves the facility without parent or camp director consent and the result ends in injury, illness or death. Release, waive, discharge and covenant not to sue Thorobred Wrestling Club, their respective administrators, directors, coaches and other employees of the organization, and other participants, all of which are hereinafter released from any and all liability to the undersigned, his or her next of kin, for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or part by the negligence of the release or otherwise.

**Signature of Parent/Legal Guardian:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Registration includes Thorobred Singlet, Jacket, T-shirt, Shorts (Combo). Please circle wrestler size(s) here.**

**\*Parents please communicate with the staff if you have a special size request!**

YS 6 YM 10 YL 14 Adult Small Adult Medium Adult Large Adult XL

Ordered \_\_\_\_\_ Distributed \_\_\_\_\_

# CLUB USE ONLY

## Payment Records & Notes

\*We also accept Visa, MasterCard, American Express and Discover

October 26<sup>th</sup>, 2016 – June 15<sup>th</sup>, 2017

Red Team \$450

Black Team \$725

### Season in Full

Date of Payment \_\_\_\_\_

Method of Payment:

Check \_\_\_\_\_

Cash \_\_\_\_\_

Credit Card \_\_\_\_\_

### Season Payments

3 payments- #1 Due at Registration  
Red \$250/Black \$325

#2 Due by 1/9/17  
Red \$100/Black \$200

#3 Due by 2/13/17  
Red \$100/Black \$200

Total  
Red\$450/ Black \$725

#1 Date of Payment \_\_\_\_\_

Method of Payment:

Check \_\_\_\_\_

Cash \_\_\_\_\_

Credit Card \_\_\_\_\_

#2 Date of Payment \_\_\_\_\_

Method of Payment:

Check \_\_\_\_\_

Cash \_\_\_\_\_

Credit Card \_\_\_\_\_

#3 Date of Payment \_\_\_\_\_

Method of Payment:

Check \_\_\_\_\_

Cash \_\_\_\_\_

Credit Card \_\_\_\_\_

Add to Contacts- \_\_\_\_\_

Send Welcome - \_\_\_\_\_

Add To Roster- \_\_\_\_\_

### \*Managers Notes:

Name:

Home/Cell:

Email: