



NESHAMINY YOUTH WRESTLING CLUB

<http://neshaminyyouthwrestling.com>

2009 -2010 Registration Form

NAME _____

ADDRESS _____

TOWN _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

BIRTHDATE _____ GRADE _____ YEARS OF EXPERIENCE _____ WEIGHT _____

INSURANCE PROVIDER _____ BIRTH CERTIFICATE _____

MOM'S NAME _____ MOM'S CELL _____

DAD'S NAME _____ DAD'S CELL _____

AMOUNT PAID _____ CHECK NUMBER _____ CASH _____

T-SHIRT SIZE _____ UNIFORM SIZE _____

I, the parent of the above child hereby give my approval to his/her participating in any and all wrestling/cheerleading activities during the current sport season. I assume all risks and hazards incidental to such participation including transportation to and from the Neshaminy Wrestling Club, the organizer, sponsors, supervisors, participants, and persons transporting my child to and from activities, for any claim arising from injury to my child except and in the amount of the Club's accident or liability insurance, provided such claims are not covered by my private medical plan. I agree to return upon request the uniform and other equipment issued to my child.

Cost: \$100.00/1st child
\$50.00/2nd child
\$25.00/3rd child
\$12.50/4th child

If you obtain \$300 in sponsorship, the registration fee for your family is waived. See the website for sponsorship forms.

Please make checks payable to:
Neshaminy Youth Wrestling Club

As an active member and parent of a child participating in this sport, I pledge (6) hours of work during the season.

Parent/Guardian Signature _____ Date: _____

Mail To: **Neshaminy Youth Wrestling Club** 5 Alberts Way, Langhorne, PA 19047