

Ann Arbor Jr. Wolverine Wrestling Club
Wrestling
Registration and Medical waiver

Athlete information:

Name: _____ Address: _____ City: _____
State: _____ Zip: _____
Home Phone: _____ Emergency: _____ Cell: _____
Birth date: _____ Email: _____
Mother's name: _____ Phone: _____
Father's name: _____ Phone: _____

Parental permission:

I, the parent/guardian of the registrant, a minor, agree that the registrant and I will abide by the rules established by the coach. The registrant will respect the facilities, other players and coaches while participating in this wrestling program. Recognizing the possibility of injury associated with wrestling, and in consideration of James Mason accepting the registrant for the wrestling program, I hereby release, discharge and/or otherwise indemnify James Mason, other volunteer assistants and the owners of the facilities used for wrestling against any claim by or on behalf of the registrant as a result of the registrant's participation in the program and/or transported to and from the same. My son has received a physical examination by a physician in the last year and has been found physically capable of participating in the wrestling program.

Parent/Guardian Signature: _____ Date: _____
Print Parent/Guardian name: _____

Medical information:

Does the child have any medical problems that might limit his participation in wrestling activities?

Is the child taking any medications? _____ Explain, if yes to any question

Known allergies or other medical information:

Consent for medical treatment:

As the parent or legal guardian of the above wrestler, I hereby give my consent for emergency medical care prescribed by a duly licensed doctor or medicine or doctor of dentistry. This care may be given under whatever conditions are necessary to preserve life, limb or well being of my dependent. The coaching staff may provide initial medical assistance.

Parent/Guardian Signature: _____ Date: _____
Health Insurance Provider: _____ Policy Number: _____

Agreement:

I, Parent/Guardian of _____ agree to hold James mason and his assistants harmless from any and all claims, which may arise from injury during wrestling activities. I understand that my child participates at his own risk. I, also, agree to keep James Mason informed of any change in the above information.

Parent/Guardian Signature: _____ Date: _____

Release and Waiver of Liability and Indemnity Agreement

(Read Carefully Before Signing)

In consideration of being permitted to participate in any way in the **Ann Arbor Jr. Wolverine Wrestling Club** Program indicated below and/or being permitted to enter for any purpose any restricted area (here in defined as any area where in admittance to the general public is prohibited), the parent(s) and/or legal guardian(s) of the minor participant named below agree:

1. The parent(s) and/or legal guardian(s) will instruct the minor participant that prior to participating in the below _____ Ann Arbor Jr. Wolverine Wrestling Club _____ activity or event, he or she should inspect the facilities and equipment to be used, and if he or she believes anything is unsafe, the participant should immediately advise the officials of such condition and refuse to participate. I understand and agree that if at any time, I feel anything to be UNSAFE: I will immediately take all precautions to avoid the unsafe area and REFUSE TO PARTICIPATE further.
2. I/WE fully understands and acknowledges that:
 - (a) There are risks and dangers associated with participation in **Wrestling** events and activities, which could result in bodily injury partial and/or total disability, paralysis and death.
 - (b) The social and economic losses and/or damages, which could result from these risks and dangers described above, could be severe.
 - (c) These risks and dangers may be caused by the action, inaction or negligence of the participant or the action, inaction or negligence of others, including, but not limited to, the Releases named below.
 - (d) There may be other risks not known or are not reasonably foreseeable at the time.
3. I/WE accept and assume such risks and responsibility for the losses and/or damages following such injury, disability, paralysis or death, however caused and whether caused in whole or in part by the negligence of the Releases name below.
4. I/WE HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE the **University of Michigan** facility used by the participant, including its owners, managers, promoters, lessees of premises used to conduct the **Wrestling** event or program, premises and ever inspectors, underwriters, consultants and others who give recommendations, directions, or instructions to engage in risk evaluation or loss control activities regarding the **Ann Arbor Jr. Wolverine Wrestling Club** facility or events held at such facility and each of them, their directors, officers, agents, employees, all for the purposes herein referred to as "Releases"...FROM ALL LIABILITY TO THE UNDERSIGNED, my/our personal representatives, assigns, executors, heirs and next of kin FOR ANY AND ALL CLAIMS, DEMANDS, LOSSES OR DAMAGES AND ANY CLAIMS OR DEMAND THEREFORE ON ACCOUNT OF ANY INJURY, INCLUDING BUT NOT LIMITED TO THE DEATH OF THE PARTICIPANT OR DAMAGE TO PROPERTY, ARISING OUT OF OR RELATING TO THE EVENT(S) CAUSED OR ALLEGED TO BE CAUSED IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEE OR OTHERWISE.
5. I/WE HERBY acknowledge that THE ACTIVITIES OF THE EVENT(S) ARE VERY DANGEROUS and involve the risk of serious injury and/or death and/or property damage. Each of THE UNDERSIGNED also expressly acknowledges that INJURIES RECEIVED MAY BE COMPOUNDED OR INCREASED BY NEGLIGENT RESCUE OPERATIONS OR PROCEDURES OF THE RELEASEES.
6. EACH OF THE UNDERSIGNED further expressly agrees that the foregoing release, waiver, and indemnity agreement is intended to be as broad and inclusive as is permitted by the law of the Province or State in which the event is conducted and that if any portion is held invalid, it is agreed that the balance shall, notwithstanding a continue in full legal force and effect.
7. On behalf of the participant and individually, the undersigned parent(s) and/or legal guardian(s) for the minor participant execute this Waiver and Release. If, despite this release, the participant makes a claim against any of the Releases, the parent(s) and/or legal guardian(s) will reimburse the Releasee for any money, which they have paid to the participant, or on his behalf, and hold them harmless.

I HAVE READ THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK AND INDEMNITY AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND HAVE SIGNED IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT, ASSURANCE, OR GUARANTEE BEING MADE TO ME AND INTEND MY SIGNATURE TO BE COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW.

Event _____

Parent or Guardian Signature (if minor) _____

Parent or Guardian Signature (if minor) _____

Printed Name of Participant _____

Address of Participant _____

Received by _____
Registrar Signature Printed Name Member # Region on File Date

**Ann Arbor Jr. Wolverine Wrestling Club
Athlete Contract:**

Dear Participant,

Being a member of a wrestling program is a privilege that carries great responsibility. The lessons learned in a wrestling will help you in many aspects of your life. Other people, including your coach and your parents have made a commitment to you. Therefore, I am asking you to make a commitment to this program. Please read this carefully and sign if you agree to make this commitment.

Wrestler readiness:

1. Arrive at practice ready to give 100%
2. Arrive on time
3. Have appropriate equipment with you
4. Bring a water bottle
5. Remember to do your homework, wrestling and school go together
6. Let the coach know if you will miss a practice

Wrestler attitude:

1. Be attentive
2. Do not distract the other participants by talking or goofing around
3. Always work to the best of you ability
4. Show respect to your teammates, coaches, assistants and your parents

Player's Name: _____

Player's Signature: _____ Date: _____