

# 2018-2019 HIGH ALTITUDE WRESTLING CLUB APPLICATION

## PARTICIPANT'S INFORMATION:

Name: \_\_\_\_\_ Birth date: \_\_\_\_\_ Age: \_\_\_\_\_ Weight: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent(s) Names: \_\_\_\_\_ Home #: \_\_\_\_\_

Wrestler's Cell #: \_\_\_\_\_ Dad's Cell #: \_\_\_\_\_ Mom's Cell #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Shirt Size: \_\_\_\_\_ Email Address: \_\_\_\_\_

*\*Please check your email for club updates, camps/clinics, practice changes, etc!\**

## WRESTLING EXPERIENCE:

# of Years Wrestling Experience (prefer 1-year experience): \_\_\_\_\_

What are your son's/daughter's goals for wrestling? \_\_\_\_\_

## TRAINING SITES:

*(please circle site(s) applying for)*

### IN SEASON (Nov – Feb):

<u>Mondays:</u>	Johnston Middle School	7:00-8:30pm	
<u>Wednesdays:</u>	Martensdale St Marys High School	7:00-8:30pm	
<u>Wednesdays:</u>	Riverside (Oakland) High School	6:30-8:00pm	*Site run by Robert Walker

**Please Circle If Paying:    Monthly (1 Day)            Monthly (2 Day)**

*\*Please Note: Training packages are the only way to get discounts on High Altitude Wrestling Camps/Clinics!*

### Website Consent

Permission to post your son(s) picture, results, and wrestler profile on our website, High Altitude Wrestling's Social Media (Facebook, Twitter, Instagram, etc) and club advertisements? **YES or NO**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*All High Altitude Wrestlers must pay a once per year \$10 fee for insurance (no exceptions!). High Altitude is still AAU and USA sanctioned. You will need the cards for competitions we attend. **Paid for insurance: YES or NO**

## **DISCLAIMER OF LIABILITY WAIVER:**

The High Altitude Wrestling Club, its owner, director, instructors and staff, do not assume liability for any injuries incurred while en route to or from or participating in any practice or competition. As a condition of enrollment, the following Disclaimer of Liability must be signed and dated by the participant, and if under the age of 18 the parent or guardian:

THE PARTICIPANT, IN ATTENDING THE HIGH ALTITUDE WRESTLING CLUB, IN USING THE FACILITIES AND IN PARTICIPATING IN PRACTICES AND COMPETITIONS, DOES SO AT HIS /HER OWN RISK. CHAD TUNINK, THE HIGH ALTITUDE WRESTLING CLUB, FACILITY OWNERS AND OPERATORS AND ALL OFFICERS, EMPLOYEES, INSTRUCTORS OR AGENTS OF HIGH ALTITUDE WRESTLING CLUB AND ANY FACILITY USED BY HIGH ALTITUDE WRESTLING CLUB SHALL NOT BE LIABLE FOR ANY INJURY OR DAMAGES SUSTAINED BY THE PARTICIPANT BEFORE, DURING OR AFTER ANY PRACTICE, COMPETITION OR OTHERWISE AT OR AROUND THE FACILITIES. THE STUDENT AND HIS/HER PARENTS/GUARDIANS ASSUME FULL RESPONSIBILITY FOR ANY SUCH DAMAGES OR INJURIES AND SO HEREBY FULLY AND FOREVER RELEASE, HOLD HARMLESS AND DISCHARGE CHAD TUNINK, THE HIGH ALTITUDE WRESTLING CLUB, FACILITY OWNERS AND OPERATORS AND ALL OFFICERS, EMPLOYEES, INSTRUCTORS OR AGENTS OF HIGH ALTITUDE WRESTLING CLUB AND ANY FACILITY USED BY HIGH ALTITUDE WRESTLING CLUB FROM ANY AND ALL CLAIMS, DEMANDS, DAMAGES, RIGHTS OF ACTION OR CAUSES OF ACTION, PRESENT OR FUTURE, WHETHER THE SAME BE KNOWN, ANTICIPATED, OR UNANTICIPATED, RESULTING FROM OR ARISING OUT OF ANY OF THE FOREGOING. THE PARENTS OR GUARDIAN FURTHER AGREE TO INDEMNIFY THE RELEASED PARTIES AGAINST ANY LEGAL ACTION BY OR ON BEHALF OF THE PARTICIPANT, INCLUDING ATTORNEY FEES TO DEFEND SUCH ACTIONS.

Full Name (please print) \_\_\_\_\_

Signature \_\_\_\_\_

If under 18:

Signature of Parent or Guardian \_\_\_\_\_

Date \_\_\_\_\_

### **INCASE OF EMERGENCY CONTACT:**

Name: \_\_\_\_\_

Relationship to Athlete: \_\_\_\_\_

Phone #: (Day): \_\_\_\_\_ Night: \_\_\_\_\_ Cell #: \_\_\_\_\_

Name: \_\_\_\_\_

Relationship to Athlete: \_\_\_\_\_

Phone #: (Day): \_\_\_\_\_ Night: \_\_\_\_\_ Cell #: \_\_\_\_\_

### **INSURANCE INFORMATION:**

Company: \_\_\_\_\_ Group #: \_\_\_\_\_ Policy #: \_\_\_\_\_

### **MEDICAL CONDITIONS:**

Please list below any medical concerns regarding your child/children that the High Altitude Wrestling Club staff should be aware of:

\_\_\_\_\_  
\_\_\_\_\_

*\*The parent or guardian is responsible for sending the wrestler to High Altitude Wrestling Club events with their required medications, inhalers, etc. If unprepared, your child/children will not be allowed to participate in any High Altitude Wrestling Club events.*