



BRYAN YOUTH WRESTLING

GENERAL INFORMATION

Name: _____

Street: _____

City: _____ State: _____ Zip: _____

Wrestler's school: _____ Grade: _____

Wrestler's birthdate: _____

Years of wrestling experience: _____ Last year's record: _____

Home phone number: _____

Wrestler's mobile phone number: _____

Wrestler's email address: _____

Parents name: _____

Parents mobile phone number: _____

Parents email address: _____

VOLUNTEERING

Bryan Youth Wrestling Club needs your help to make this program a success.

Please indicate if you would like to help with:

- Coaching Team Assistant Photographer Awards Banquet Committee

BRYAN YOUTH WRESTLING TOURNAMENT

The wrestler's parents are expected to help with the Bryan Youth Wrestling Tournament.

Please indicate if you would like to help with:

- Admissions Table Help Concessions Bracketing

WEBSITE CONSENT

With the submission of this registration form you give your consent to allow your athletes name and/or picture to be placed on the Bryan Youth Wrestling website. To have all reference to your athlete removed send a request to doug@bryanwrestling.com.

| Club Membership | | | |
|--|---|--|-----|
| | \$65.00 for membership / \$45.00 for additional siblings | | |
| | | SUB-TOTAL A | |
| INSURANCE | | | |
| Each wrestler must have at least one of the following, unless you know what the difference is we recommend the AAU-AB . | | | |
| TYPE | COST | NOTE | EXT |
| AAU-AB | \$14.00 | Primary for Bryan Youth Wrestling | |
| | | SUB-TOTAL B | |
| SUB-TOTAL A + SUB-TOTAL B = AMOUNT OWED \$ | | | |

Make check payable to: **Bryan Youth Wrestling**

We require a deposit of \$35.00 for the team singlet at the time the singlet is issued.

- Checklist:** Registration form Payment Medical Waiver Copy of Birth Certificate