Lower Cape Youth Wrestling

Permission to Participate-Season 2011

PARENT/GUARDIAN INFORMATION:

First,Name_____Last,Name_____

Address_____

City _____ State _____ Zip Code _____

Home Phone _____ Cell Phone _____

E-Mail _____@_____

Emergency Contact Info_____

PARTICIPANT(S) INFORMATION:

1. First Name _____ Last Name _____

Date of Birth _____ Age _____; Gender: Female ___ Male ___

2. First Name _____ Last Name _____

Date of Birth _____ Age _____; Gender: Female ___ Male ___

RELEASE OF LIABILITY FOR PERSONAL INJURY

I _____ do hereby release for Lower Cape Youth Wrestling Club, Inc (LCYW)its owners, operators, instructors, employees, agents and servants, from any and all liability for personal injury to me or my child and/or ward as the result of any negligence arising out of or in the course of or in any way related to me or my child's use of the facilities, equipment, apparatus or premises and /or my or my child's participation in other events organized, run and/or sponsored by the LCYW, whether at said wrestling club or elsewhere. On behalf of myself and my Child, I agree to indemnify and hold harmless the said claims, demands,costs, expenses and compensation arising out of or in the course of or in any way related to any personal injury to me or my child.

By signing this release, I acknowledge my understanding and acceptance of the following:

1. Any sport requires strength, agility and concentration and that it is solely my responsibility to determine that my child is in good health and good physical and mental condition before permitting my child to exercise, work out, receive instruction or perform.

2. That any sport that requires twisting, turning, tumbling, jumping, flexion, extension and rotation, which movements are often performed with considerable force and/or at considerable height and which can result in severe, permanent personal injuries, including, but not limited to, bruised, strained, sprained or torn muscles, tendons and ligaments, broken bones, derangements or dislocations of joints, concussion, brain damage, nerve and spinal cord injury, paralysis and death.

3. That all sports require the use of apparatus and/or equipment, which may cause or contribute to severe, permanent personal injuries, such as those described above.

4. No persons (students, parents, or any other personnel) allowed inside with any materials including but not limited to, matches or lighters, which may cause a fire in the training area.

I have read and understand the Release of Liability for Personal Injury.

Signature of Parent/Guardian_____Date__ /___ /___

All coaches and staff will have CORI checks.

Lower Cape Youth Wrestling EIN 27-2026702