



About Blue Hawk Youth Wrestling

Blue Hawk Youth Wrestling is a sanctioned USA-Wrestling Club. Our Blue Hawk Youth Wrestling is a sanctioned USA-Wrestling Club. Our program is open to interested athletes in **grades 1-5**. It is our goal to promote interest in the sport of Folkstyle Wrestling among the youth and parents involved with our club.

We will provide a disciplined and competitive program for its members to learn and develop wrestling skills, self-confidence, and the ideals of good sportsmanship. Our program is instructional and will teach a basic understanding of the rules and techniques.

Safety is of utmost importance to our club. Participants will be grouped with other wrestlers according to age, weight and skill level. An emphasis on building strength and endurance will continue throughout the season. We will also highlight the importance of good nutrition and exercise.

The Blue Hawk Youth Wrestling Club's season runs from mid-November through the end of February. Practices are held in the **Phillips Exeter Academy Wrestling Room – In the Cage**

Practice Schedule: Monday and Thursday from 6:00 – 7:30 pm.

Wrestlers should arrive 10 minutes early to change, stretch out, and warm up before practice begins.

We will compete against other youth wrestling clubs in the area. These opportunities include both scrimmages and tournaments alike. Youth wrestlers will be grouped with opponents according to age and weight. A list of scheduled events will be posted on our website soon after the November New Hampshire Youth Wrestling Coaches Association meeting. Wrestlers are expected to participate in as many practices and tournaments as they can. It is understood that there will be exceptions. Please notify the coaching staff in advance of any expected absences.

You can expect additional information once registration is complete.

Checks should be made payable to: **Blue Hawk Wrestling Club** and mailed to:

Blue Hawk Wrestling Club

c/o Sharon Dawkins

1 Hobart ST

Exeter, NH 08333



Blue Hawk Wrestling Club

C/O Sharon Dawkins
1 Hobart Street
Exeter, NH 03833



2011-2012 WRESTLING SEASON APPLICATION FOR MEMBERSHIP

REGISTRATION FEE	\$195	Each participant will receive 1 Sweatshirt. Additional sweatshirts can be purchased for \$30 and must be paid for in advance. Circle Choices.
Paid Check/Cash	<input type="text"/>	
Sweatshirt	YS YM YL YXL AS AM AL AXL	<input type="text"/> \$
T- Shirt	YS YM YL YXL AS AM AL AXL	

Wrestlers Name: _____

Grade: _____ DOB: _____

Address: _____ Phone: _____ Cell: _____

City: _____ State: _____ Zip: _____

Email Address1: _____ Email Address2: _____

Waiver and Release from Liability

1. I, _____ the undersigned, on behalf of myself, my heirs, and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliate clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers,, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors, and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USA Wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

2. Releasor understands and acknowledges that USA Wrestling sanctioned activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision, or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any USA Wrestling sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

3. Releasor acknowledges and fully understands that each participant in any USA Wrestling sanctioned event, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and other losses to person or property, including death, and that severe social and economic losses may also result not only from Releasor's own actions, inactions or negligence, but also from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Furthermore Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

Signature of Wrestler: _____ Print Name: _____ Date: _____

The undersigned _____ does hereby represent that he/she is, in fact, the parent or guardian of _____ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

Signature of Parent or Legal Guardian: _____ Relationship to Minor: _____

Print Name: _____ Date: _____

Emergency / Insurance Information and Parent Consent Form For Treatment of Minor

Name: _____ DOB: _____ Grade: _____

Phone: _____ Cell: _____

Address: _____ City: _____ Zip: _____

Secondary Emergency Contact (Indicate Relationship) : _____

Family Physician: _____

Physician Phone Number: _____

Name of Insurance Carrier: _____

Policy # : _____

We, the parents of the above named boy/girl, hereby give our approval for his/her participation in the Blue Hawk Wrestling Club for all sessions. We (parent/guardian) assume all risks and hazards incidental to the conduct of the activities. We do hereby release, absolve, and hold harmless Blue Hawk Wrestling Club, Exeter School District, Exeter Regional Cooperative School District, its Directors, Staff, The Town of Exeter, NH, Phillips Exeter Academy, the organizers, sponsors, coaches, volunteers, & anyone connected with the activities. In case of injury to our son/daughter, we hereby waive all claims against the aforementioned person(s). I/We will abide by the policies set forth. Blue Hawk Wrestling Club, Exeter School District, Exeter Regional Cooperative School District, it's Directors, Staff, The Town of Exeter, NH, Phillips Exeter Academy, the organizers, sponsors, coaches, volunteers assume no responsibility for accidents or injuries. I (Parent/Guardian) understand that the person whose name appears on this application is in proper physical condition to participate. I/We assume all risks and hazards and further discharge, Blue Hawk Wrestling Club, Exeter School District, Exeter Regional Cooperative School District, it's Directors, Staff, The Town of Exeter, NH, Phillips Exeter Academy, the organizers, sponsors, coaches, volunteers and Officers from and against all claims, demand and actions or cause actions.

In the event of an emergency requiring medical attention beyond first aid I/We hereby grant permission to a physician or hospital personnel designated by The Blue Hawk Wrestling Club to provide medical attention to the applicant.

PARENT/GUARDIAN SIGNATURE: _____ Date: _____

I give my permission for my child's photo & name to be used in and on Blue Hawk Wrestling Webpage, The Exeter Wrestling Webpage, Wrestling Program, Wrestling Flyers, Etc. We will never print the last name of our participants.

PARENT/GUARDIAN SIGNATURE: _____ Date: _____

2011-2012 Blue Hawk Wrestling Expectations and Code of Conduct

Practices are held three times a week. Given the technical, "one-on-one" nature of the instruction that the coaches must provide at practices in a relatively short time frame, it is imperative that the coaches have the undivided attention of all wrestlers at all times. Blue Hawk Wrestling Coaches will not tolerate misbehavior or unsportsmanlike conduct from any wrestler or family member. Wrestlers are expected to remain in good academic standing and parents are at all times expected to demonstrate positive support for their child, all other wrestlers, coaches, officials and volunteers. Please read with your child the NYSCA's Parents' and Players' Code of Ethics found below. Your signature below represents your understanding of Blue Hawk Wrestling's expectations.

Parents' Code of Ethics

- ❖ I hereby pledge to provide positive support, care, and encouragement for my child participating in youth sports by following this Parents' Code of Ethics Pledge.
- ❖ I will encourage good sportsmanship by demonstrating positive support for all players, coaches, and officials at every game, practice, or other youth sports event.
- ❖ I will place the emotional and physical well being of my child ahead of a personal desire to win.
- ❖ I will insist that my child play in a safe and healthy environment.
- ❖ I will support coaches and officials working with my child, in order to encourage a positive and enjoyable experience for all.
- ❖ I will demand a sports environment for my child that is free of drugs, tobacco, and alcohol, and will refrain from their use at all youth sports events.
- ❖ I will remember that the game is for youth-not for adults.
- ❖ I will do my very best to make youth sports fun for my child.
- ❖ I will ask my child to treat other players, coaches, fans, and officials, with respect regardless of race, sex, creed, or ability.
- ❖ I promise to help my child enjoy the youth sports experience by doing whatever I can, such as being a respectable fan, assisting with coaching, or providing transportation.
- ❖ I will require that my child's coach be trained in the responsibilities of being a youth sports coach and that the coach upholds the Coaches' Code of Ethics.
- ❖ I will read the NYSCA National Standards for Youth Sports (a pdf file is available for downloading at www.nays.org) and do what I can to help all youth sports organizations implement and enforce them.

Players' Code of Ethics

- ❖ I hereby pledge to be positive about my youth sports experience and accept responsibility for my participation by following this Players' Code of Ethics Pledge.
- ❖ I will encourage good sportsmanship from fellow players, coaches, officials and parents at every game and practice by demonstrating good sportsmanship.
- ❖ I will attend every practice and game that I can, and will notify by coach if I cannot.
- ❖ I will expect to receive a fair and equal amount of playing time.
- ❖ I will do my very best to listen and learn from my coaches.
- ❖ I will treat my coaches, other players, officials and fans with respect regardless of race, sex, creed, or abilities and I will expect to be treated accordingly.
- ❖ I deserve to have fun during my sports experience and will alert parents or coaches if it stops being fun!
- ❖ I deserve to play in an environment that is free of drugs, tobacco, and alcohol and expect adults to refrain from their use at all youth sports events.
- ❖ I will encourage my parents to be involved with my team in some capacity because it's important to me.
- ❖ I will do my very best in school.
- ❖ I will remember that sports are an opportunity to learn and have fun.

Wrestler's Signature: _____ Print Name: _____ Date: _____

Parent (s) Signature: _____

Print Name(s): _____ Date: _____