

Brawler Elite Wrestling Beginner Group

2021-2022 Youth Wrestling Season (Nov 1 – April 29)

Boys and Girls 4-7 years old – Semi Private Group

Wrestler's Name (first: middle: last): _____

Age: _____ DOB: ___/___/___ Grade: _____ Weight: _____ Years of experience: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Cell Phone Number: _____ Shirt Size _____

Parent Name: _____

E-Mail: _____

2021-2022 Season (November 1st - April 29th)

\$100 per month per wrestler (monthly payments due at the first practice of each month) - These groups are semi-private groups and are limited to the first 8 wrestlers that pay. Any Friday/Saturday live sessions are included with this session.

Requirements:

All wrestlers must have an individual NYWAY membership, can be purchased for \$17 at <https://www.nyway.org>
Tight fitting clothes and wrestling shoes. Team singlets can be purchased separately.

Practices are at Great Northern Town Mall

Schedule (Subject to change):

Mondays, Tuesdays and Thursdays 6:00-7:00pm

I, _____ the parent or legal guardian of _____ assumes full responsibility for my child in case of any injuries or losses that he/she may incur or suffer directly or indirectly, from training, traveling, to or from or participating in any Brawler Elite LLC wrestling practices and/or events including negligence from anybody associated with Brawler Elite LLC. I fully understand that this activity involves risks and dangers of serious bodily injury, including permanent disability and death. These risks and dangers may be caused by my own actions or inactions, the actions of others participating in the activity, the conditions in which the activity takes place or the negligence of coaches, parents and/or other wrestlers. I do acknowledge and fully accept and assume all such risks and responsibility for losses, costs and damages that incur as a result of participation and that participation is at our own risk. We hereby release and hold harmless Brawler Elite LLC, the home owner/renter, the coaches and any other person associated with Brawler Elite LLC for any injuries or losses incurred. I hereby release discharge and covenant not to sue Brawler Elite LLC or anybody associated with Brawler Elite LLC.

Parent Signature: _____ Date: ___/___/___

Make checks payable to: Brawler Elite LLC