



2016 - 2017 WWC Registration Checklist

All forms must be legible and have original signatures unless otherwise noted.

Athlete's Name: _____

| <u>Item #</u> | <u>Club Initials</u> | <u>Required Item</u> |
|---------------|----------------------|--|
| 1. | _____ | WWC Athlete Profile. |
| 2. | _____ | Copy of Athlete's Birth Certificate. |
| 3. | _____ | Copy of current USA Wrestling Card with athlete aligned under the WWC (Purchase card after September 1st, 2016 for 2016-17 season). |
| 4. | _____ | WWC Medical and Liability Release Form. |
| 5. | _____ | WWC Concussion Information Sheet. |
| 6. | _____ | WWC Parents Instructions for Medical Treatment Form. |
| 7. | _____ | WWC Team Rules. |
| 8. | _____ | WWC Parent(s)/Guardian(s) Code of Ethics. |
| 9. | _____ | WWC Team Equipment Policy. |
| 10. | _____ | WWC Multi-Media Policy and Release Form. |
| 11. | _____ | Registration Fee (\$75.00 for 1st athlete; \$55.00 for 2nd athlete and \$45.00 for each additional athlete thereafter. Cash, check, or Money Orders ONLY , no credit/debit cards. Please make money orders out to WWC .) |



WWC Athlete Profile

(PLEASE PRINT LEGIBLY)



Name _____

Date of Birth: _____ Age: _____

Gender (M/F): _____ Height: _____ Weight (estimate): _____

School Attending: _____ Grade: _____

Home Address: _____
Street City State Zip Code

Home Phone Number: _____

Parent(s)/Guardian(s) Cell Phone: Mom: _____ Dad: _____

Parent(s)/Guardian(s) Email: _____

Parents/Guardian Name (First/Last): _____

Have you ever Wrestled: _____ If so, how many years: _____

Last season's team (if applicable): _____

Varsity or JV: _____ Weight Class: _____

Greatest Wrestling Accomplishment (if applicable): _____



2016 - 2017 Warriors Wrestling Club (WWC)

Medical and Liability Release Form

“This organization and its activities are not sponsored by or endorsed by the Steilacoom Historical School District.”

I/We am/are aware that wrestling is a HIGH RISK SPORT and that it can be a dangerous and unpredictable activity involving MANY RISKS OF INJURY.

I/We understand that the dangers and risks of wrestling include, but are not limited to, transmittable disease and disorders, death, serious neck and spinal injuries which may result in complete or partial paralysis, brain damage, blindness, serious injury to virtually all internal organs, serious injury to virtually all bones, joints, ligaments, muscles, tendons and other aspects of the muscular skeletal system, and serious injury or impairment to other aspects of my body, general health and well-being. I/We understand that the dangers and risks of practicing or competing in wrestling may result not only in serious injury, but in a serious impairment of my future abilities to earn a living, to engage in other business, social and recreational activities and generally to enjoy life. Because of the dangers of wrestling, I/We recognize the importance of following all coaches, officials and tournament staff instructions regarding techniques, training and other rules and to agree to obey such instructions. I/We have read the above warning and release and understand its terms.

I/We understand that wrestling is a HIGH-RISK SPORT involving many RISKS OF INJURY, including but not limited to those risks outlined above. I/We agree to allow my/our child, in case of injury be treated by a licensed physician, registered nurse and or certified athletic trainer at the facility and or licensed medical facility and to assume all costs related to such treatment. I/We hereby waive my/our right to any and all charge backs against the Warriors Wrestling Club (WWC), the Steilacoom Historical School District, the staff of the school district, the student organization of the school district and furthermore agree to resolve any and all disputes that may arise over all matters directly with the Warriors Wrestling Club (WWC).

I/We understand that any athlete or club member competing with the Warriors Wrestling Club (WWC), using any facilities reserved by the Warriors Wrestling Club (WWC) does so at his or her own risk. I/We agree that neither the Warriors Wrestling Club (WWC), the Steilacoom Historical School District, nor the staff of the school district, nor the student organization of the school district, shall in any way be held liable for any accident or injury in anyway received on account of or while engaged in any athletic activity sponsored by the Warriors Wrestling Club (WWC). I/We further agree that neither the Warriors Wrestling Club (WWC), the Steilacoom Historical School District, the staff of the school district, the student organization of the school district staff shall be responsible for the payment of any bills rendered for medical services as a result of such accidents or injuries. I/We also acknowledge that it is our responsibility to provide for any medical, disability or other insurance to mitigate any costs that may be unfortunately incurred as a result of participation in this activity.

The Warriors Wrestling Club (WWC), the Steilacoom Historical School District, nor the staff of the school district, nor the student organization of the school district are not liable for any damages arising from personal injury sustained by the participating individual and so I/we hereby fully and forever exonerate and discharge the Warriors Wrestling Club (WWC), the Steilacoom Historical School District, the staff of the school district, the student organization of the school district, owners, employees and other agents 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 the wrestlers participation as a member of the Warriors Wrestling Club (WWC) and in the use of the facilities.

By signing below, I/We certify that I/We have read the above 2016-2017 Warriors Wrestling Club (WWC) Medical and Liability Release Form and I/we understand its content, and agree to its terms and will be responsible for any medical or other charges in connection with my or my child’s participation with 2016- 2017 Warriors Wrestling Club (WWC).

Athlete’s Printed Name

Date

Parent's/Guardian's Printed Name Signature
(Wrestlers 17-years and younger)

Date



WWC Concussion Information Sheet (Page 1 of 2)

A concussion is a brain injury and all brain injuries are serious. They are caused by a bump, blow, or jolt to the head, or by a blow to another part of the body with the force transmitted to the head. They can range from mild to severe and can disrupt the way the brain normally works. Even though most concussions are mild, **all concussions are potentially serious and may result in complications including prolonged brain damage and death if not recognized and managed properly.** In other words, even a “ding” or a bump on the head can be serious. You can’t see a concussion and most sports concussions occur without loss of consciousness. Signs and symptoms of concussion may show up right after the injury or can take hours or days to fully appear. If your child reports any symptoms of concussion, or if you notice the symptoms or signs of concussion yourself, seek medical attention right away.

Symptoms may include one or more of the following:

- Headaches
- “Pressure in head”
- Nausea or vomiting
- Neck pain
- Balance problems or dizziness
- Blurred, double, or fuzzy vision
- Sensitivity to light or noise
- Feeling sluggish or slowed down
- Feeling foggy or groggy
- Drowsiness
- Change in sleep patterns
- Amnesia
- “Don’t feel right”
- Fatigue or low energy
- Sadness
- Nervousness or anxiety
- Irritability
- More emotional
- Confusion
- Concentration or memory problems (forgetting game plays)
- Repeating the same question/comment

Signs observed by teammates, parents and coaches include:

- Appears dazed
- Vacant facial expression
- Confused about assignment
- Forgets plays
- Is unsure of game, score, or opponent
- Moves clumsily or displays incoordination
- Answers questions slowly
- Slurred speech
- Shows behavior or personality changes
- Can’t recall events after hit
- Seizures or convulsions
- Any change in typical behavior or personality
- Loses consciousness
- Can’t recall events prior to hit

What can happen if my child keeps on playing with a concussion or returns too soon?

Athletes with the signs and symptoms of concussion should be removed from play immediately. Continuing to play with the signs and symptoms of a concussion leaves the young athlete especially vulnerable to greater injury. There is an increased risk of significant damage from a concussion for a period of time after that concussion occurs, particularly if the athlete suffers another concussion before completely recovering from the first one. This can lead to prolonged recovery, or even to severe brain swelling (second impact syndrome) with devastating and even fatal consequences. It is well known that adolescent or teenage athlete will often under report symptoms of injuries. And concussions are no different. As a result, education of administrators, coaches, parents and students is the key for your child’s safety.

Concussion Information Sheet (Page 2 of 2)

If you think your child has suffered a concussion

Any athlete even suspected of suffering a concussion should be removed from the game or practice immediately. No athlete may return to activity after an apparent head injury or concussion, regardless of how mild it seems or how quickly symptoms clear, without medical clearance. Close observation of the athlete should continue for several hours. The “**Zackery Lystedt Law**” in Washington now requires the consistent and uniform implementation of long and well-established return to play concussion guidelines that have been recommended for several years:

“a youth athlete who is suspected of sustaining a concussion or head injury in a practice or game shall be removed from competition at that time”

and

“...may not return to play until the athlete is evaluated by a licensed health care provider trained in the evaluation and management of concussion and received written clearance to return to play from that health care provider”.

You should also inform your child’s coach if you think that your child may have a concussion. Remember it’s better to miss one game than miss the whole season. And when in doubt, the athlete sits out.

For current and up-to-date information on concussions you can go to:

<http://www.cdc.gov/ConcussionInYouthSports/>

Athlete Printed Name

Parent/Legal Guardian Printed Name

Parent/Legal Guardian Signature

Date



Parent's Instructions for Medical Treatment
(PLEASE PRINT LEGIBLY)

Wrestler's Name: _____ Date of Birth: _____

Parent/Guardian Name: _____ Relationship: _____

Home Address:

| | | | |
|--------|------|-------|----------|
| Street | City | State | Zip Code |
|--------|------|-------|----------|

Home Phone: _____ Work Phone: _____

Please indicate another person to call if an accident occurs and we are unable to reach you.

Name: _____ Phone No: _____

Family Doctor: _____ Phone No: _____

Does your child have any pre-existing medical conditions: _____

Is your child presently on medication (yes/no)? _____ If yes, please list medication (s) below:

Drug Sensitivities: _____

Other Allergies: _____

Date of your child's last complete physical examination by a medical doctor: _____

Please read the alternative statements below and sign under the one that you choose. SIGN ONLY ONE!

1. I verify that my child is medically cleared to participate in the sport of wrestling. If my child needs medical attention, it is my wish that I am contacted before any medical procedures are taken on my child, unless immediate treatment is necessary to save my child's life or to prevent permanent injury.

Parent/Guardian Signature: _____ Date: _____

2. I verify that my child is medically cleared to participate in the sport of wrestling. If my child needs medical treatment while participating, it is my wish that the treatment is started while efforts are being made to contact me. So that treatment is not delayed, I consent to any medical procedures that the physician believes are needed, on the understanding that efforts to contact me will continue to be made. I accept responsibility for all costs related to such treatment.

Parent/Guardian Signature: _____ Date: _____



Warriors Wrestling Club (WWC) Team Rules

General:

1. Participants will comply with all requirements as directed in the Club By-Laws and any other documentation published by the Executive Board of Directors and will conduct themselves in an appropriate manner at all times.
2. All participants will win and lose with class, you're representing your family, your club, your teammates, and yourself, make everyone proud of Warriors wrestling. Never demean any teammate or opponent in any way – taunting or any inappropriate behavior will not be tolerated. Keep personal celebrations on the mat in line; share your joys and frustrations with teammates and coaches away from the mat.
3. Behavior in practice rooms, locker rooms and at matches will be professional at all times. Disrespecting of any fellow Club members, administrators, coaches, referees or opposing teams and their supporters will not be tolerated at any time. No clothing that includes profanity or images deeming to be lacking tact in anyway will be tolerated. Any activity which could damage the reputation of the WWC will not be permitted and such behavior will be dealt with in accordance with the Club By-Laws.

Practice & Practice Room Etiquette:

1. All wrestlers must arrive 15 minutes prior to start of practice to help with mats or other club support needs. Be fully prepared and focused for practice, not giving 100% in practice hurts the TEAM and YOU. Your performance and example affects everyone. Don't let the TEAM or yourself down.
2. Practice clothes will be clean and serviceable to include legal wrestling shoes and no metal of any kind on clothes or wrestling shoes. Everyone needs to shower directly after practice with anti-bacterial soap.
3. All tasks/exercises assigned by the coaches are to be executed immediately. Slacking, goofing off and generally avoiding work in any way shape or form will not be tolerated.
4. There will be no sitting/lying on the mat at any time unless directed by the coaching staff. When a coach, teammate or guest is addressing the team, keep silent and respectful; ask questions when you are not sure of something.

On the Mat:

1. All wrestlers will remain absolutely silent on the mat with the exception of three words: "Yes", "No" and "Sir or Ma'am". The referee is to be addressed as "Sir or Ma'am" at all times (not "Ref", "Blue", etc.). There is no leniency concerning this rule.
2. You must shake your opponents hand before the match begins and you will shake your opponents and their Coaches hands after the match has concluded, win or lose. Your headgear will remain on and secured (if applicable) until you step off the mat.

These rules are firm and non-negotiable. Abide by them and you will succeed, ignore them and you will not be part of this Club. Exceptional teams have no individual exceptions; therefore these rules apply equally to all participants. I, the undersigned, guarantee that my parents have seen and understood the rules stated above. In signing this sheet, I am agreeing to follow them to the fullest extent and am aware of the consequences should I fail to do so.

Wrestler Printed Name _____ Date: _____

Parent/Guardian Name/Signature _____ Date: _____



WWC Parents/Guardians Code of Ethics

From the WWC Director: Our children learn more from their parent's behavior than anyone else in their lives, so we ask that you interact with all participants in a positive way while you are attending any activity associated with Warriors Wrestling Club (WWC). The following Parents/Guardians Code of Ethics will be adhered to at all times:

- I will comply with and fully support all requirements as directed in the Club By-Laws and any other documentation published by the Executive Board of Directors and I will conduct myself in an appropriate manner at all times.
- I will encourage good sportsmanship by demonstrating positive support for all wrestlers, coaches, and officials at all wrestling events to include tournaments, matches, practices or social functions. I will provide support for coaches and officials by working with my child to provide a positive and enjoyable experience for all. I agree to allow only coaches to talk to officials during competitions.
- I will place emotional and physical well-being of my child ahead of any personal desire to win. I will demand a drug, alcohol, and tobacco free environment for my child and agree to assist by refraining from their use at all events. I will abide by all of the school district policies while on school grounds, whether our district or another.
- I will remember that this program is for the kids and not for the adults. I will ask my child to treat other administrators, wrestlers, coaches, fans and officials with respect regardless of race, sex, creed or ability.
- I will promise to help my wrestler enjoy this experience within my own personal limitations by assisting with coaching, being a respectful fan, or whatever I am capable of doing within the guidelines set forth in the Club By-Laws.
- I agree that problems with coaches and or board members do not need to be a public issue and I will discuss any issue in a mature fashion away from kids and other parents at a time when emotions do not overshadow common sense (24-hour rule). I will meet with coaches before or after practice to discuss any issue to avoid being a distraction as I am aware that they need as much time to spend with the wrestlers as is possible to get them prepared for competitions.

I the undersigned agree and guarantee that I and all my immediate family members (spouses, children and grandparents, etc...) understand and will comply with the Code of Ethics as stated above. I acknowledge as does my immediate family that failure to do so could result in disciplinary action being taken as directed by the Club By-Laws.

Wrestler's Name: _____

Parent(s) Printed Name: _____

Parent(s) Signature: _____ Date: _____



2016 - 2017 WWC Team Equipment Policy

From the WWC Director: As a wrestler, your uniforms and equipment are important aspects to your safety, meeting rules requirements and maintaining team morale. However, having uniforms and equipment in your possession requires that you assume responsibility for those items and are willing to care for them as your own. Wrestling uniforms and equipment can be expensive and continually replacing uniforms and equipment is something the WWC cannot afford to do. We as a coaching staff believe that how you handle your uniforms and equipment is a reflection of your character and a reflection of our team; therefore, it is vitally important that you care for all issued items in a manner that is respectful and responsible.

Uniforms/Equipment Accountability: Each wrestler will be issued and sign for their personal team uniform and equipment (if applicable). After signing for your uniform and or equipment, it will be your responsibility to ensure that these items are maintained in a serviceable, clean and sanitary fashion in accordance with coaching staff and or manufactures instructions. You will be required to bring all required items to practices and or competitions as directed by the coaching staff and it will be your responsibility for the replacement costs of any lost items that are not returned to the team. Please report lost items to the coaching staff immediately so we can issue replacement items (if available) as soon as possible.

Equipment Replacement Costs: Wrestling Uniform (Singlet): \$80.00

I have read the Equipment Policy and understand its contents to include the accountability and replacement requirements contained therein.

Wrestlers Printed Name: _____

Date: _____

Parent(s)/Guardian(s) Printed Name: _____

Parent(s)/Guardian(s) Signature: _____

Date: _____



WWC Multi-Media Policy and Release Form

From the WWC Director: This form explains potential uses of club members being photographed and/or video images being taken by designated representatives of the club and allows you to grant or deny permission to the club to release your athlete's image for display or publication. This form also allows a parent or guardian the choice whether or not their athlete may be identified by name on the club internet website or other public media forums. As a safeguard, the club does not directly publish athlete names to the internet and/or other public media outlets unless given permission by a parent or guardian.

The club uses internal and external media to help promote our club; recognize the individual and or team accomplishments, provide a way for deployed military family members to view their athlete compete as well as extended family members across the country and abroad. Media recordings and still photography has also been used as a way in which our athletes can improve their individual performance as wrestlers. Club member images may be also published or displayed in printed materials (such as brochures and newsletters, etc.), videos, club websites and information about club events and activities provided to external organizations and media outlets.

Parents/Guardians have two options for granting or denying consent:

- Parents/Guardians may deny permission for any display or publication of their athlete's image and or name. You should select this option if you do not want your athletes photograph and or name to be used on the club or other external website, in club publications or in release to external organizations or the public media.
- Parents/Guardians also may grant permission for their athlete's image and or name to be published or displayed in print, video, and/or digital media. Selecting this option means that your athlete's photograph and or name may appear in club publications and or website and may be released to external organizations or the media.

This consent form remains valid throughout your athlete's participation with the club or until a new form is completed and signed by a parent/guardian or eligible adult age 18 and above.

Athletes Printed Full Name: _____

PHOTO/VIDEO Release:

- I deny permission to use my athlete's image for display, publication or release to external organizations.
- I grant permission for use of my athlete's image in print, video and/or digital media. I understand that my athlete's image may be used or released by the team without additional notification and that my athletes name may appear along with his or her photograph.

NAME Release:

- I grant permission for my athlete to be identified by name on the team or other public internet website or any other external public media outlets.
- I deny permission for my athlete to be identified by name on the team or other public internet website or any other external public media outlets.

Printed Name of Parent/Guardian (or Athlete age 18 or over)

Date

Signature of Parent/Guardian (or Athlete age 18 or over)

Date