Brea Wrestling Club Wrestler Contract - 2020-2021 Season/Year

Name (Last, First, MI)	Birthdate	Age	
Address (Street, City, Zip)	Phone ( )		
No Candidate will be permitted to participate in any activity	ty until this form has been compl	leted <u>IN FULL</u> .	
<ul> <li>Wrestler/Parent will faithfully keep and abide by the following rules,</li> <li>I will not disrupt or interfere with practices and/or official bouts.</li> <li>I solemnly pledge that I will not in any way damage, or deface p</li> <li>I agree to abide by all decisions of bout officials and will not cree</li> <li>I agree that I will be a gentleman/lady at all times and I will refra</li> <li>I agree to return upon request; the uniform and other equipment is and tear, if loaner gear has been given to me.</li> <li>I/We agree to be financially responsible for Brea Wrestling Clup practices/bouts and I/we will reimburse Brea Wrestling Clup for on non-returned or damaged equipment (if loaner equipment is generated as the second second</li></ul>	roperty, building or equipment. ate any unsportsmanlike gestures at an ain from using foul language. issued to me in as good a condition as <b>b</b> equipment issued to applicant other to or the loss and damage to said equipme	y time. when received except for normal wear than the normal wear and tear during	
We, <b>Brea Wrestling Club</b> , as a private club reserve the right to dismireserve the option to return the refund for membership.	ss any participant who does not adhere	e to the above rules of conduct and	
Parent/Guardian Signature		_Date	

Candidate/Wrestler's Signature\_\_\_\_\_

Section II

Section I

## WAIVER AND RELEASE AGREEMENT

Date

In consideration of my dependant minor being allowed to participate in any way, including travel to and from, any wrestling event or related activity of USA Wrestling, California Age Group wrestling Association (OCWA), Brea Wrestling Club, or any USA club, I hereby:

- Agree that prior to allowing my dependant minor to participate, I will inspect the facilities, equipment, competition pools, age and weight 1. division. If I believe anything is unsafe or beyond the capability of my dependant minor, I will immediately notify the event director and withdraw my dependant minor from any further participation until the condition(s) is rectified to my satisfaction.
- Acknowledge and fully understand that my dependant minor will be engaging in activities that involve risk of serious injury, including 2. permanent disability and death, and severe social and economic losses which might result not only from his/her own actions, inactions or negligence, but also the actions, inactions or negligence of others, the rules of play, or the condition of the premises, or of the equipment used. Further, that there may be other risks not known to me or not foreseeable at this time.
- Assume all the foregoing risks and accept personal responsibility for any and all damages following such injury, permanent disability or death 3. including any medical conditions, or prior medical conditions contributing to such.
- Release, waive, discharge and covenant not to sue, or bring any legal action, including judicial review and/or arbitration proceedings against 4. USA Wrestling, its affiliated clubs, their respective administrators, directors, officials, agents, coaches, employees, or volunteers, other participants, sponsors or sponsoring agencies, advertisers, promoters, and if applicable owners and/or tenants of the premises used to conduct the event, all of which are hereinafter referred to as "releases," from any and all liability to my dependant minor, myself, my heirs, next of kin, or assigns, for any and all claims, demands, losses or damages on account of injury, including death or damage to property, caused or alleged to be caused in whole or in part by the negligence of one or more of the releases.
- Understand that I am giving up substantial constitutional rights for myself, my dependant minor, my heirs, next of kin and assigns, and knowing 5 this, I sign the Waiver Agreement knowing the risks involved, and do sign entirely of my own free will.

Parent/Guardian Signature			Date
Candidate's Signature			Date
Section III		EMERGENCY CONTACTS	
IN CASE OF EMERGENCY,	NEAREST RELATIVE (	OR FRIEND TO CONTACT IF PA	RENT/GUARDIAN CANNOT BE REACHED:
Name:	Phone:	Name:	Phone:
Section IV	AUTH	ORIZED CLUB OFFICIAL ON	NLY
I certify that this contract was co	mpleted in full prior to thi	s candidate's participation in any of	the club's activities.
Director/Coach Signature_			Date