

HOLD HARMLESS\_\_\_\_  
MEDICAL RELEASE\_\_\_\_  
RELEASE & WAIVER OF LIAB.\_\_\_\_  
ADDED EMAILS\_\_\_\_  
TSHIRTS & SHORTS\_\_\_\_

WRESTLERS INFORMATION

WRESTLERS NAME\_\_\_\_\_

ADDRESS\_\_\_\_\_

BIRTHDATE\_\_\_\_\_ GRADE\_\_\_\_\_

PRIOR YEARS EXPERIENCE\_\_\_\_\_

APPROX. HEIGHT\_\_\_\_\_ APPROX. WEIGHT\_\_\_\_\_

FATHER NAME\_\_\_\_\_

FATHER PHONE\_\_\_\_\_

FATHER EMAIL\_\_\_\_\_

MOTHER NAME\_\_\_\_\_

MOTHER PHONE\_\_\_\_\_

MOTHER EMAIL\_\_\_\_\_

TSHIRT SIZE\_\_\_\_\_ SHORT SIZE\_\_\_\_\_

DOES WRESTLER HAVE ANY ISSUES WE NEED TO BE AWARE  
OF \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*\*DO NOT FILL IN BELOW*

BIRTH CERTIFICATE\_\_\_\_ EMAIL ENTERED\_\_\_\_ IKWF CARD APPLIED\_\_\_\_ PAID\_\_\_\_

TSHIRT\_\_\_\_ SHORTS\_\_\_\_ SINGLET\_\_\_\_

\_\_\_\_\_