



Governor Wrestling Registration 2016-17 Season



Father: _____ *E-mail:* _____

Mother: _____ *E-mail:* _____

Guardian(s): _____ *E-mail:* _____

Home Phone: _____ *Cell Number:* _____

Home Address: _____ *City:* _____

(1) Wrestler's Name: _____ *Date of Birth:* _____

Age: _____ *Grade:* _____ *Weight:* _____ *Years Wrestled:* _____ *Group:* _____

(2) Wrestler's Name: _____ *Date of Birth:* _____

Age: _____ *Grade:* _____ *Weight:* _____ *Years Wrestled:* _____ *Group:* _____

(3) Wrestler's Name: _____ *Date of Birth:* _____

Age: _____ *Grade:* _____ *Weight:* _____ *Years Wrestled:* _____ *Group:* _____

(4) Wrestler's Name: _____ *Date of Birth:* _____

Age: _____ *Grade:* _____ *Weight:* _____ *Years Wrestled:* _____ *Group:* _____

Emergency Contact in Event Parent/Guardian cannot be reached: _____

Relationship: _____ *Phone Number:* _____

Cost is \$40.00 Per Wrestler – Make Checks Payable to Governor Wrestling

By signing this document I agree to hold harmless the Governor Wrestling Association and the Pierre Public Schools, it's participants, volunteers and sponsors, for any and all injuries sustained during practice or tournaments. I am aware that this is a physical sport and I am allowing my child(ren) to participate.

Parent/Guardian Signature

Date

Please See Reverse Side for Additional Information

Governor Wrestling Practices

While Governor Wrestling assigns primary coaches to facilitate each of the scheduled practices, parents are strongly encouraged to assist during practice sessions to ensure that all members receive individual attention that is needed. With this in mind please indicate your interest in assisting during practice sessions. Please note that if you have a child under 6, you are not required to assist, but you are required to attend practices with your child. If you choose to be on the mat, then we ask that you specify your willingness to assist.

Beginner Group: Monday 6:00-6:45 Georgia Morse Middle School – For new young wrestlers. Practices designed for an introduction to wrestling with an emphasis on providing young wrestlers with a general orientation to the sport, exposure to simple takedowns (single and double legs) and basics for success in the bottom position. Roughly half of the practice time will be devoted to skills development, while the other half will emphasize games/activities that develop mat coordination and fundamentals

Group 1: Tuesday & Thursday 5:45-6:45 Georgia Morse Middle School - Practices designed for an introduction to wrestling with an emphasis on providing young wrestlers with a general orientation to the sport, exposure to simple takedowns (single and double legs) and basics for success in the bottom position.

Group 2: Tuesday & Thursday 7:00-8:00 Georgia Morse Middle School - Practices designed for wrestlers with 1 to 2 years of experience with an emphasis on developing technique and beginning to expand a wrestler's range of takedowns, riding skills, bottom work, and pinning combinations.

Group 3: Tuesday & Thursday 6:00-7:00 High School Wrestling Room - Practices designed for wrestlers with 3/4 or more years of experience with an emphasis on providing a complete range of takedowns, riding skills, bottom work, and pinning combinations. This is a fast paced practice emphasizing skill development, extensive live wrestling, and wrestler conditioning.

_____ No, my schedule will not permit me to assist

_____ Yes I will be willing to assist at practice

Parent / Guardian Name: _____

Assisting with Group: ___ Beginner ___ 1 ___ 2 ___ 3

Pierre Invitational

The Governor Wrestling program hosts their Invitational Tournament this year which serves as the primary source of revenue to cover costs (e.g., practice space, summer camps, equipment, etc.). As a result, we ask that parents assist with setting-up and running the tournaments which will be held on January 22nd this year. Please indicate the area you (and your spouse if applicable) wish to assist and a master list will be generated and distributed prior to the tournament. If you are new to wrestling and have questions about any of the areas listed below please feel free to ask one of the club representatives.

_____ *Name*

- _____ Admissions
- _____ Weigh-Ins/Check-in Tables
- _____ Awards Table
- _____ Wall Charts
- _____ Concession Stand (2 hour shift)
- _____ Pancake Feed (a.m.)

_____ *Spouse (if applicable)*

- _____ Admissions
- _____ Weigh-Ins/Check-in Tables
- _____ Awards Table
- _____ Wall Charts
- _____ Concession Stand (2 hour shift)
- _____ Pancake Feed (a.m.)