



# TENAFLY RECREATION JR. WRESTLING



2016-2017

All Tenafly and Alpine children in **K – 8<sup>th</sup> grade** are welcome to sign up for our Junior Wrestling program. The program will concentrate on wrestling instruction geared toward learning the fundamentals of High School Wrestling and will stress: conditioning, take downs, reversals and pinning combinations. Wrestlers will compete against children of similar age, grade and weight class. **Participants must be willing to make a commitment to the team.** Wrestlers are urged to attend all practices and matches. Wrestling promotes Physical Fitness, Stamina, Coordination, Flexibility and Self-Confidence.

**Practices will be held on Mondays & Wednesdays in the Tenafly High School Auxiliary Gym starting on November 28<sup>th</sup>**

**K-3<sup>rd</sup> 6 – 7:30pm**

**4<sup>th</sup> – 8<sup>th</sup> 7:30 – 9pm**

**Matches are usually held on Saturday mornings.**

Each wrestler is responsible for purchasing their own headgear and wrestling shoes.  
Uniforms are supplied by the Recreation Department.

Please submit completed registration form with the fee of \$75. This fee covers the league fees, shirt, tournaments, referees, etc. Please submit application to: Tenafly Recreation 100 Riveredge Rd. Tenafly, NJ 07670.

**A copy of your child's birth certificate must be included with this application!**

## **2016-2017 JUNIOR WRESTLING REGISTRATION FORM**

**SHIRT SIZE CIRCLE ONE- YS, YM, YL, YXL, AS, AM, AL, AXL**

CHILDS NAME \_\_\_\_\_ GRADE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_

PHONE (H) \_\_\_\_\_ (W) \_\_\_\_\_ (C) \_\_\_\_\_

EMERGENCY CONTACT \_\_\_\_\_ PHONE \_\_\_\_\_

DOCTOR NAME \_\_\_\_\_ PHONE \_\_\_\_\_

SPECIAL MEDICAL INFORMATION: \_\_\_\_\_

**I hereby acknowledge that my/my child's picture may be used for program advertising by the Tenafly Recreation Department. Agree \_\_\_\_\_ Disagree \_\_\_\_\_**

*I the undersigned parent/guardian of the above named applicant do hereby give my permission for him/her to participate in this specific Tenafly Recreation Commission activity.*

*I do assume all risk and hazards incidental to this trip, activity and transportation and do further hereby release, absolve and hold harmless the Borough of Tenafly, Tenafly Recreation Commission, its agents, instructors and coaches.*

*I do further understand that the Borough of Tenafly or the Tenafly Recreation Commission does **not** provide Accident Insurance for this activity.*

*I hereby fully consent to emergency medical care to be rendered by competent medical physicians in the event that the above named child should require such attention during this activity.*

*I understand that I being the parent or legal guardian will exhibit respectful behavior towards players, coaches, referees and Umpires. If any of my actions are inappropriate, I understand that I will be asked to leave the facility. In addition I have read and signed the code of conduct.*

PARENTS NAME \_\_\_\_\_ SIGNATURE \_\_\_\_\_

FEE: \$75.00

RECEIPT # \_\_\_\_\_ DATE \_\_\_\_\_

**Registration form will not be accepted without signed Code of Conduct – on back →**