



### **ABOUT US**

VOLUNTEER RUN/ NON-PROFIT YOUTH WRESTLING CLUB  
USA WRESTLING CHARTERED CLUB | ORGANIZATION. ID 1800106602  
TEXAS USA WRESTLING - SOUTH REGION MEMBER  
SAFE SPORT PROGRAM PARTICIPANT

### **JOIN US**

OPEN TO BOYS & GIRLS 5+  
OFFER FOLKSTYLE WRESTLING  
FREESTYLE/ GRECO-ROMAN WRESTLING (OLYMPIC STYLE)

### **CONTACT US**

EMAIL | [legacywrestlingclubtxl@gmail.com](mailto:legacywrestlingclubtxl@gmail.com)  
COACH | D.J. DOCKERY | 979.587.1230  
COACH | JORDAN DOCKERY | 979.450.9006  
STAFF/ VOLUNTEER | KATIE DOCKERY | 979..255.0006  
STAFF/ VOLUNTEER | BERYL DOCKERY | 979.676.4960

### **FIND US**

PRACTICE | 3450 CAMPUS DR. BRYAN HIGH SCHOOL | BRYAN.TX  
PARKING | PARK IN LOT OFF BARAK LANE

### **FOLLOW US**

WEBSITE | [www.legacywrestlingclubtxl.com](http://www.legacywrestlingclubtxl.com)  
FACEBOOK | [@legacywrestlingclubtx](https://www.facebook.com/legacywrestlingclubtx)  
INSTAGRAM | [legacywrestlingclubtx](https://www.instagram.com/legacywrestlingclubtx)  
TWITTER | [@legacywctx](https://twitter.com/legacywctx)

### **SPONSOR US**

SEE A COACH OR STAFF/ VOLUNTEER FOR DETAILS & FORMS

# 2019-2020 Registration

## PARTICIPANT INFO.

First Name:		Last Name:	
Date of Birth:		Age (as of August 31):	
School:			
Weight:		Grade:	
USAW Membership Card #:		Track Wrestling #:	
Street Address:			
City:		State:	Zip:
Phone: (if applicable)		Email: (if applicable)	
Has your child wrestled (folkstyle/ freestyle/ greco-roman) before? (circle one)    Yes    No			
If Yes, Where and How long?			
Has your child participated in sports before? (circle one)    Yes    No			
If Yes, What did they play?			
Shirt Size (circle one)	YOUTH: XS   S   M   L   XL	ADULT:	S   M   L   XL   XXL   XXXL
Additional information:			

## 2019-2020 Registration

Participant's Name		
First:	Last:	
Parent/ Guardian Info.		
First Name:	Last Name:	
Relationship to Child/ Minor Participant:		
Street Address:		
City:	State:	Zip:
Phone:	Email:	
Parent/ Guardian Info.		
First Name:	Last Name:	
Relationship to Child/ Minor Participant:		
Street Address:		
City:	State:	Zip:
Phone:	Email:	

How did you hear about us? (Choose below)				
<input type="checkbox"/> Facebook	<input type="checkbox"/> Instagram	<input type="checkbox"/> Twitter	<input type="checkbox"/> Website	<input type="checkbox"/> Safe 2 Save
<input type="checkbox"/> Other, Tell us more!				

Club Use Only					
Amount Due:		Paid by:	<input type="checkbox"/> CASH	<input type="checkbox"/> CHECK	<input type="checkbox"/> CARD
Other:		Date:			
Amount Paid:		Notes:			
Balance:					

# 2019–2020 Registration

## WRESTLER CODE OF CONDUCT

1. I commit myself to work as hard as I can during practice and competitions. I will never stop trying my best, I will be a hardworking, attentive teammate that respects myself, teammates, coaches, and family.
2. I will be a team player and will encourage my teammates during practice and competitions.
3. I commit to conduct myself with good sportsmanship and respect for my teammates, coaches, opponents, referees, officials, and family.
4. I will not use vulgar or discouraging language or gestures towards my teammates, coaches, opponents, referees, officials, and family.
5. I understand that if my behavior is deemed unfavorable during the course of a match or practice, I may be dismissed from the team at the Coaches discretion.
6. I will ensure that my actions reflect my best self and represent Legacy Wrestling in a manner that is in the best interest of myself and my team.

Participant Name

Printed First and Last Name:

Participant's Signature:

Date:

Parent/ Legal Guardian Name

Printed First and Last Name:

Signature of Parent/ Legal Guardian:

Date:

Relationship to Participant/ Minor:

# 2019-2020 Registration

## MEDIA/ PHOTO/ VIDEO WAIVER RELEASE

I, (print parent/ legal guardian's name) \_\_\_\_\_

hereby assign and grant Legacy Wrestling Club of Bryan, TX the right and permission to use and publish the photographs/film/videotapes/electronic representations and/or sound recordings made of myself and or my child, (print child/ minor participant's name)

\_\_\_\_\_ at all wrestling events/ practices/ and activities and I hereby release the Legacy Wrestling Club of Bryan, TX activity coordinators, coaches, volunteers, related parties, and other organizations associated with the activity from any and all liability from such use and publication. I hereby authorize the reproduction, sale, copyright, exhibit, broadcast, electronic storage, and/or distribution of said photographs/ film/ videotapes/ electronic representations and/or sound recordings without limitation of the discretion of the Legacy Wrestling Club of Bryan, TX and I specifically waive any right to any compensation I may have.

I, (print parent/ legal guardian's name) \_\_\_\_\_

acknowledge that I have had sufficient opportunity to review the provisions of this document and understand its purpose, meaning, and intent.

The undersigned (print parent/ legal guardian's name) \_\_\_\_\_

does hereby represent that he/ she is, in fact, the parent or legal guardian of (print child/ minor participant's name) \_\_\_\_\_ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

(Child/ Minor Participant) Printed First and Last Name:

(Child/ Minor Participant) Signature:

Date:

(Parent/ Legal Guardian) Printed First and Last Name:

(Parent/ Legal Guardian) Signature:

Date:

Relationship to Child/ Minor Participant:

# 2019-2020 Registration

## RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT WITH PARENTAL CONSENT ("AGREEMENT")

IN CONSIDERATION of being permitted to participate in any way in any event ("Activity") at any time during the current membership year I, for myself, my personal representatives, assigns, heirs, and next of kin:

1. ACKNOWLEDGE, agree, and represent that I understand the nature of the Activity and that I am qualified, in good health, and in proper physical condition to participate in such Activity. I further agree and warrant that if, at any time, I believe the conditions to be unsafe, I will immediately discontinue further participation in the Activity.

2. FULLY UNDERSTAND that: (a) THIS ACTIVITY INVOLVES RISKS AND DANGERS OF SERIOUS BODILY INJURY, INCLUDING PERMANENT DISABILITY, PARALYSIS, AND DEATH ("Risks"); (b) these Risks and dangers may be caused by my own actions or inactions, the actions or inactions of others participating in the Activity, the conditions in which the Activity takes place, or THE NEGLIGENCE OF THE "RELEASEES" NAMED BELOW; (c) there may be OTHER RISKS or SOCIAL AND ECONOMIC LOSSES either not known to me or not readily foreseeable at this time; and I FULLY ACCEPT AND ASSUME ALL SUCH RISKS AND ALL RESPONSIBILITY FOR LOSSES, COSTS, AND DAMAGES I incur as a result of my participation, or that of the minor, in the Activity.

3. HEREBY RELEASE, DISCHARGE, AND COVENANT NOT TO SUE the sanctioning organization(s), their administrators, directors, agents, officers, members, volunteers, and employees, other participants, officials, rescue personnel, sponsors, advertisers, owners and lessees of Premises on which the Activity is conducted, (each of the foregoing shall be considered one of the RELEASEES herein) FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON MY ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS; AND I FURTHER AGREE that if, despite this RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT I, or anyone on my behalf, makes a claim against any of the Releasees, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES from any litigation expenses, attorney fees, loss, liability, damage, or cost which may be incurred as the result of such claim.

I ACKNOWLEDGE THAT I AM AGE 18 OR OLDER, HAVE READ THIS AGREEMENT AND FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, HAVE SIGNED IT FREELY AND WITHOUT ANY INDUCEMENT OR ASSURANCE OF ANY NATURE, AND I INTEND IT TO BE A COMPLETE AND UNCONDITIONAL RELEASE OF ALL LIABILITY TO THE GREATEST EXTENT ALLOWED BY LAW AND AGREE THAT IF ANY PORTION OF THIS AGREEMENT IS HELD TO BE INVALID, THE BALANCE, NOTWITHSTANDING, SHALL CONTINUE IN FULL FORCE AND EFFECT.

PRINTED NAME OF PARTICIPANT: \_\_\_\_\_

PARTICIPANT'S SIGNATURE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

### **MINOR RELEASE: (must be completed by Parent/Guardian for any participant under the age of 18)**

AND I, THE MINOR'S PARENT AND/OR LEGAL GUARDIAN, UNDERSTAND THE NATURE OF THE ACTIVITY AND THE MINOR'S EXPERIENCE AND CAPABILITIES AND BELIEVE THE MINOR TO BE QUALIFIED, IN GOOD HEALTH, AND IN PROPER PHYSICAL CONDITION TO PARTICIPATE IN SUCH ACTIVITY. I HEREBY RELEASE, DISCHARGE, COVENANT NOT TO SUE, AND AGREE TO INDEMNIFY AND SAVE AND HOLD HARMLESS EACH OF THE RELEASEES FROM ALL LIABILITY, CLAIMS, DEMANDS, LOSSES, OR DAMAGES ON THE MINOR'S ACCOUNT CAUSED, OR ALLEGED TO BE CAUSED, IN WHOLE OR IN PART BY THE NEGLIGENCE OF THE "RELEASEES" OR OTHERWISE, INCLUDING NEGLIGENT RESCUE OPERATIONS AND FURTHER AGREE THAT IF, DESPITE THIS RELEASE, I, THE MINOR, OR ANYONE ON THE MINOR'S BEHALF MAKES A CLAIM AGAINST ANY OF THE RELEASEES NAMED ABOVE, I WILL INDEMNIFY, SAVE, AND HOLD HARMLESS EACH OF THE RELEASEES FROM ANY LITIGATION EXPENSES, ATTORNEY FEES, LOSS LIABILITY, DAMAGE, OR ANY COST THAT MAY OCCUR AS A RESULT OF ANY SUCH CLAIM.

PRINTED NAME OF PARENT/GUARDIAN: \_\_\_\_\_

PARENT/GUARDIAN SIGNATURE ( if participant is under the age of 18): \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
(Street) (City) (State) (Zip)

PHONE: \_\_\_\_\_ DATE: \_\_\_\_\_

