



# Gladiator Wrestlers

## Registration and Release Forms

Please Print Clearly and Sign

Haines Trained Wrestling  
 1476 Buchanan Valley Road  
 Orrtanna, PA 17353  
[www.hainestrained.com](http://www.hainestrained.com)

\*\*Parents must sign release form in order for wrestler to step on the mat\*\*

### Registration Form

Name: \_\_\_\_\_

Parents Name: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Age: \_\_\_\_\_ Grade: \_\_\_\_\_ DOB: \_\_\_\_\_

Weight: \_\_\_\_\_ lbs. Height \_ ft \_\_\_\_\_ in. School \_\_\_\_\_

#of years wrestled: \_\_\_\_\_ USA Card# \_\_\_\_\_

Home#(-\_\_\_\_) \_\_\_\_\_ Cell#-(--\_) \_\_\_\_\_

Fathers Work #-(\_\_\_\_), \_\_\_\_\_ Cell #-(\_\_\_\_), \_\_\_\_\_

Mothers Work#-( ) \_\_\_\_\_ Cell#-(,..\_\_\_\_), \_\_\_\_\_

Email: \_\_\_\_\_

**All Parents/Guardians Must Sign the Following Two Releases:**

**1. Permission to Treat**

Coach Haines and/or his designee (i.e. staff member) have permission to have \_\_\_\_\_ treated if necessary at the  
**(wrestler's name)**  
appropriate facility if he is injured, or if he appears to be injured.

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

**2. Indemnification By Parent or Guardian of Applicant**

The Undersigned parent or guardian of

\_\_\_\_\_  
**(Wrestler's Name)**

The applicant, for and in further consideration of the wrestling camp/club accepting said applicant does hereby release and discharge the curators of Haines Trained Wrestlers and its representatives, employees, and agents from any and all debts, claims, and demands, actions, damages, causes of action, judgments, or suits of any kind which may result of this applicant participating in, traveling to or from the Haines Trained Wrestlers, and hereby agree to have and indemnify and keep harmless the curators of the Haines Trained Wrestlers, its representatives, employees and agents against liability claims, judgments or demands for damages arising as a result of any course instruction given the applicant by Coach Haines or any designee of Haines Trained Wrestlers.

\_\_\_\_\_  
**Signature of Parent/Guardian**

\_\_\_\_\_  
**Date**

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