

**Weyburn Wrestling Club  
Athlete Registration Form**



**Athlete Information**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_ Gender: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/town: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_

**Waiver and Liability Release form signed? Y / N      Media Release form signed? Y / N**

Does the athlete have any allergies or medical conditions that we should be aware of? If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Parent/Guardian Information**

**Parent/Guardian #1:**  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
City/town: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Receive team communication? Y / N

**Parent/Guardian #2:**  
First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone #: \_\_\_\_\_  
City/town: \_\_\_\_\_ Postal Code: \_\_\_\_\_  
Email: \_\_\_\_\_ Receive team communication? Y / N

**Fees**

Freshie/Novice/Peewee (\$275): \_\_\_\_\_ Bantam/Cadet/Juvenile: (\$375) \_\_\_\_\_

**Paid by:** (circle) Cash | Cheque | E-transfer (weyburnwrestlingclub@gmail.com) | Jumpstart/KidSport



## Waiver & Liability Release

1. I, the undersigned, on behalf of myself, my heirs and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE WEYBURN WRESTLING CLUB, INC., its affiliated clubs, administrators, agents, directors, officers, provincial organizations, members, committees, volunteers, all employees of the Saskatchewan Amateur Wrestling Association or Wrestling Canada Lutte, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable, owners, lessors and operators of premises used to conduct any Weyburn Wrestling Club sanctioned event, meet, practice or activity (all hereinafter "Releasors") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present, or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of participation in, attendance at or traveling to and from any Weyburn Wrestling Club sanctioned event or activity including, but not limited LOSSES CAUSED BY [PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.
2. Releasor understands and acknowledges that Weyburn Wrestling Club activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENTLY, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OF PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.
3. Releasor acknowledges and fully understands that each participant in any Weyburn Wrestling Club sanctioned event, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property including death, and that severe social and economic losses may result not only from Releasor's own actions or negligence, but from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of premises or of any equipment used. Further Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.

I ACKNOWLEDGE THAT I HAVE SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTANDS ITS PURPOSE, MEANING AND INTENT.

\_\_\_\_\_  
Participant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Participant Name (PRINT)

The undersigned, \_\_\_\_\_ does hereby represent that he/she is, in fact, the parent or legal guardian of \_\_\_\_\_ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name (PRINT)

\_\_\_\_\_  
Relationship to the minor.

\_\_\_\_\_  
Date



## MEDIA RELEASE FORM

Weyburn Wrestling Club Media Release Form

I, \_\_\_\_\_, hereby grant permission to the Weyburn Wrestling Club to use photographs and/or video of my child, \_\_\_\_\_, for promotional purposes, including but not limited to digital and social media platforms and marketing materials.

I understand that the photographs and/or video may be used in publications, printed materials, online publications, presentations, websites, and social media. I also understand that no royalty, fee, or other compensation shall become payable to me or my child by reason of such use.

I hereby waive any right that I may have to inspect or approve the finished product or products and the advertising copy or other matter that may be used in connection with them or the use to which they may be applied.

I acknowledge that I am the parent or legal guardian of \_\_\_\_\_ and have the legal authority to authorize the above consent and release.

I have read this consent and release prior to signing it and understand its contents.

Signature of Parent or Legal Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

Printed Name of Parent or Legal Guardian: \_\_\_\_\_

Name of Child: \_\_\_\_\_