

Fox Yalley Elite Wrestling

1 Class \$300 2 Classes \$400

Sunday's September 8 – December 15 5-6:30 Advanced Folkstyle

Tuesday's September 10 – December 17 6-7:30 Advanced Folkstyle

2024 FVE Wrestling Registration/Waiver Form

Wrestler Name:	Address: _		
City: Date of Bi	rth:/	Age:	
Grade Weight S	School/Club:	US	A Card #
Emergency Contact Info Lega	l Guardian Name:		
Email	Cell	#1: ()	
Waiv	er - 2024 Fall FVE	Sessions	
I, the parent/guardian of the c	andidate for the Jai	nuary 1 st 2024 -	December 31 st 2024 FVE
Wrestling at Fox Valley Elite Wand	/restling Academy, I	hereby give appı	oval of his/her participation in any
transporting or coaching the p wrestling clinic. I also grant pe authorize and obtain medical the participant become ill or in emergency treatment.	e clinic. I hereby rele stling Club, the orga participant of all liab ermission to manag care from any licen	ease, waive, abs anizers, supervis bility for injuries ing personnel or sed physician, h	olve, indemnify and hold sors, participants, and persons incurred while participating in the other clinic representatives to ospital, or medical clinic should
Parent Signature		Date: /	1