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| To Complete the Registration Process:   1. Fill in KWC registration package below (6 Pages Total) 2. Go to [www.oawa.ca](http://www.oawa.ca) (Click Membership, Individual Registration, Register with a Club, Look for KWC in the pull down menu, check box “Wrestler” and submit your athletes form online) 3. **Photocopy** Proof of Age-**If you have not done so in a previous year** (Birth Certificate, Driver’s License) 4. Annual Club Membership fee of: $200 for Jr. and $300for Sr. Includes OAWA Membership 5. Registration and Membership Fees are due the first week of practice or after the 2 practice trial period.   (Please make cheques payable to Kingston Wrestling Club, E-Transfer to kingstonwrestling@hotmail.com) Membership is September 2021-August 2022 |
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| **Athletes Information: (Please print neatly)**  First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City/Town:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Postal Code:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Athlete** Cell Phone # (If applicable): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date of Birth:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Health Card #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  mm/dd/yy  **Athlete** Email Address:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Family Doctor’s Name & Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Please state any medical information that may affect participation in practice/tournaments: (If more space is needed, please attach a separate page)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Parent/Guardian Information: (If under the age of 18)**  **Parent/ Guardian # 1:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(For Parent/Bingo Communication list)  **Parent/ Guardian # 2:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Home Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Work Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(For Parent/Bingo Communication list) |

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| **Athletes under 18 years of age:**  **Please have a parent/guardian sign below confirming that they grant any Kingston Wrestling Club staff member full authorization to act on their behalf on overnight excursions. This includes the signing of any waiver forms for competitions on the behalf of the parent.**  **Medical Authorization:**  In an emergency, I hereby give permission for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to be examined by a licensed physician selected by any member of the club staff, to be hospitalized, secure proper treatment, anesthesia, or surgery for my child.  I (parent/ Guardian first and last name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ agree to the preceding authorization.  \*It is understood that whenever reasonably possible, KWC will notify the parent/guardian of any medical situation, treatment, and results of any medical care.  **Parent/ Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

**Photograph and Video Release:**

I agree that photographs and videos of my child may be uploaded to the Kingston Wrestling Club Website/Facebook/Instagram.

I also give permission for KWC to use photos and videos of my child for promotional use.

**Parent/ Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(If athlete is under 18)**

Please check the box below if you **DO NOT** wish to have any photos/videos of your child posted on our website, Facebook, Instagram or used for club promotion:

**Parent/ Guardian Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(If athlete is under 18)**

**Membership Agreement Waiver/ Disclaimer of Liability:**

The risk of injury from the activities involved in this program is significant. Particular rules, equipment, and personal discipline may reduce this risk, but the risk of serious injury does exist. I participate in the sport of Wrestling because it is physically and mentally challenging. I know that there are physical risks and hazards inherent in Wrestling, as there are in most sports.

I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, and assume full responsibility for my/my child's participation; and, additional risks associated with my travel to and from events, and associated with non-competitive activities related to events and other activities.

I AGREE TO BE RESPONSIBLE FOR MYSELF. I am participating voluntarily in Wrestling. I agree that there are risks in Wrestling. By participating voluntarily in Wrestling, I am exposed to these risks and hazards. I agree to accept them and be responsible for any injury or other loss which I might receive while participating in Wrestling.

The Kingston & Area Olympic Wrestling Club, and its coaching staff, do not assume liability for any injuries incurred while at any scheduled practice or wrestling related event, or on the way to or from any said event or practice. Queen’s University does not assume liability for injuries incurred while practicing at their facility, which is our club practice location at this time.

The athlete, by participating in any wrestling related activity, does so at his/her own risk. The athlete and his/her parents assume full responsibility for any damages or injuries which may occur during participation in club activities and hereby fully and forever exonerate and discharge the Kingston & Area Olympic Wrestling Club, its coaching staff, and Regiopolis Notre-Dame Catholic High School from claims, demands, rights of action or causes of action, present or future, whether the same be known, anticipated or unanticipated, resulting from or arising out of the athlete’s participation in the program and in use of the facilities.

Please check here to acknowledge your agreement.

* **All applicants**: **I HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE.**

Or, I am the Parent or Legal Guardian if the applicant is under 18 years of age and I have read, understand, and agree to the above.

Applicant’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Applicant’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed at: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(location)

\* Participant if 18 years old or older. Signature of Parent/Guardian (if Participant is under 18)

**KWC Athletes Code of Conduct, Rules, Policies and Procedures.**

As a member of Kingston and Area Olympic Wrestling Club all athletes are expected to:

* **Shower at Regi directly after practice or as soon as possible when the athlete arrives home. This is to avoid the athlete getting ringworm and any other skin infection. The showers/change rooms are located right off the gym.**
* Abide by the rules and regulations of the Ontario Amateur Wrestling Association, the Canadian Amateur Wrestling Association, or the rules of any host venue that we as a club are visiting.
* Arrive approx. 10 minutes before practice, with appropriate clean attire, ready to learn and work hard.
* Respect team mates, coaches, parents as well as opponents and treat them in a courteous manner.
* Inform the coach of any injuries or skin conditions as soon as possible. You will not be allowed to practice or compete if you have an infectious/contagious disease. Once the skin has returned to normal, or you have been cleared by a doctor, you will be able to return to the mats.
* Respect any facility that we are training or competing in. This includes hotel accommodations while away at tournaments. Theft or vandalism will not be tolerated.
* Use appropriate language at practice or at any wrestling related event.
* When travelling, all athletes are expected to stay in their assigned rooms. **There will be appropriate chaperones for athletes under the age of 18.** All athletes must be in their assigned rooms by 10 pm without exception. Any violation of this policy will result in the athlete being sent home at his/her own expense.
* Parents of wrestlers that are under 12 years of age (Grades 8 and under) are responsible for transportation and accommodation while away at tournaments, and for supervision during the event.
* The consumption of alcohol or drugs while representing our club is strictly forbidden.
* All athletes should be prepared to compete to the best of their ability; representing themselves, their families, and our club with pride.
* The KWC does not advocate any behavior contrary to fair play. Examples include: fighting, poor sportsmanship, or arguing with officials/coaches.

Defiance of any of the above rules/policies can result in an immediate suspension by any coaching staff present at that time. In the case of an overnight trip, the athlete can be sent home at his/her own expense or the expense of the parent/guardian if under the age of 18.

Ultimately, the Head Coach reserves the right to refuse or revoke membership to any athlete who fails to comply with the KWC rules, policies, and procedures. In the case of an appeal by the athlete or his/her parent/guardian, our executive will review the details of the suspension before the final decision is made.

**Wrestling is a very physical and technical sport. With this in mind, it is at the coaches’ discretion if an athlete is ready for competition. Attendance, physical preparedness, commitment, and attitude will dictate who is eligible for competitions.**

By signing below, both the athlete and parent/guardian (if under 18) acknowledge that they have read and accept the KWC Athletes Code of Conduct, Rules, Policies, and Procedures.

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Athlete Parent/Guardian (if athlete is under 18)

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Date Signed:

**Bingo Training**

**Please note: Bingo is an essential funding component to our programs. At present the bingo halls are closed and there is no need for volunteers. We will reach out to all members to establish family members able to volunteer to help run our allotment of bingo fundraisers when they resume.**

To keep our registration fees as low as possible, we require one parent/relative from each family to do volunteer bingo training and to do approximately 8 hours of bingo volunteering a year. This is only 1-3 Sunday shifts a year.

Our bingos at this time are in 2 hour time slots one Sunday per month (Time slots are 12-2pm, 2-4pm, and then 4-6pm) The most each person can do is 4 hours per shift. The money raised from bingo funding goes directly toward facility costs, coaching expenses while away at tournaments, Clinics, tournament vehicle rentals, and most importantly it allows wrestling to be affordable for all families.

If you are not already bingo trained, please circle the date below that you can do the training: (Training is approx. 1 hour in length)

All of the training is in the VIP Room of the Treasure Chest Bingo Hall:

1600 Bath Road [www.treasurechestbingo.com](http://www.treasurechestbingo.com)

Please visit the Treasure Chest Bingo Association website: [www.tcba-kingston.ca](http://www.tcba-kingston.ca) and choose a bingo training date on the left hand side of the main page. Please write the date that you have chosen below so that we can register you for the training through our club.