

PRINCE WILLIAM WRESTLING CLUB, INC. REGISTRATION Winter 25-26

*****NO REFUNDS CASH, CHECK, or Online Invoice ONLY*****

PWWC 1st Wrestler \$190.00 _____ Additional Sibling(s) \$85.00 each x _____ = _____

NVWF Fee \$100.00 each x _____ = _____

TOTAL PAID: _____ Cash # _____ Invoice# _____

****ALL WRESTLERS & COACHES MUST HOLD A CURRENT USAW CARD****

Wrestler #1 Information:

Name: _____ Birthday: ____/____/____

USAW#: _____ Medical (Ex: Allergies): _____

T-Shirt Size (Circle One): YS YM YL AS AM AL AXL

Wrestler #2 Information:

Name: _____ Birthday: ____/____/____

USAW#: _____ Medical (Ex: Allergies): _____

T-Shirt Size (Circle One): YS YM YL AS AM AL AXL

Wrestler #3 Information:

Name: _____ Birthday: ____/____/____

USAW#: _____ Medical (Ex: Allergies): _____

T-Shirt Size (Circle One): YS YM YL AS AM AL AXL

Coach Information (if applicable)

Name: _____ USAW#: _____

Contact Information:

Parent/Guardian Name: _____

Phone Number(s): _____

Email(s): _____

Home Address: _____

- How did you hear of PWWC? _____
- PWWC will adhere to all COVID and school protocols of Prince William County Schools. As a parent/legal guardian of the wrestler(s) registered hereon, I give permission for the child's participation in wrestling training and agree to abide by all PWWC/USAW/NVWF rules of play. On behalf of my child, I voluntarily agree to hold harmless Prince William Wrestling Club, Inc. Forest Park High School/PWCS, including directors, coaches, staff and other participants for any claim arising out of injury/illness to said child. I attest that the information provided is accurate and true to the best of my knowledge. I hereby give permission to have my child's name and/or photos released for advertising and/or website pertaining to PWWC Panthers.

Signature (as read, approved, & will volunteer)

Date

Office Use Only:

Email: _____ Paid PWWC: _____ Paid NVWF: _____ NVWF Reg: _____ BDay Verified: _____

USAW#: _____ Shirt: _____ Singlet #: _____