

# LION WRESTLING CLUB (2009 - 2010)



**Purpose:** To promote area wrestling emphasizing the fundamentals of the sport.

**Who Can Join:** Any interested wrestler in grades 1<sup>st</sup> - 8<sup>th</sup>. All schools & kids welcome!  
(You must be in First Grade to join the club)

**Location:** Linn-Mar High School Wrestling Room

**Days & Times:** Grades 1 - 3 / Monday & Thursday / 5:45pm - 6:45pm, starting November 16<sup>th</sup>, 2009  
Grades 4 - 8 / Monday & Thursday / 7:00pm - 8:15pm, starting November 16<sup>th</sup>, 2009

**Membership:** \$45.00 - Grades 1 - 6  
\$35.00 - Grades 7 - 8 (shorter season)

Membership includes a Linn-Mar Wrestling T - Shirt, an AAU card, entry into the Lion Developmental Wrestling Tournament (1<sup>st</sup>-6<sup>th</sup>) and free entry to the Linn-Mar H.S. home dual meets (when accompanied by a parent).

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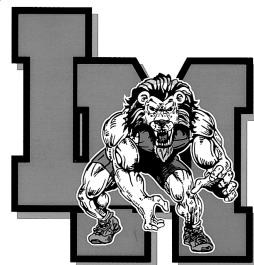
**Information:** Bring this registration form and payment to the: (checks payable to Lion Wrestling Club)

### PARENT'S MEETING

Thursday - November 5th, 2009 at 6:30pm  
Linn - Mar High School - Commons Area

**For additional information contact:** Jeff Nelson 131 Mango Drive Hiawatha, IA 52233  
Phone: 929-6177 Email: jlnelson41@yahoo.com

**Visit the Linn-Mar Wrestling Web site at:** [www.linnmarwrestling.com](http://www.linnmarwrestling.com)



\*\*\*\*\* Cut Here & Return Bottom Section Only! \*\*\*\*\*

### 2009 - 2010 LION WRESTLING CLUB REGISTRATION

Child's Name: \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Shirt Size: (circle one - sizes run small) Youth: 10 - 12 14 - 16 or Adult: S M L XL XXL

Parent(s) Name: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

**I would be willing to help at the annual Little Lion Wrestling Tourney - Sunday, February 7<sup>th</sup>, 2010**  YES  NO

*I certify that the child named has my permission & is physically able to participate in the Lions Wrestling Club. I accept full responsibility for his/her behavior and participation. I waive all claims for injury against the Lion Wrestling Club, club members, coaches & Linn-Mar School District. I understand that I am responsible for carrying health and/or accident insurance for this activity and that primary insurance is not provided by the Linn-Mar School District or the Lion Wrestling Club.*

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