



## **Alliance Wrestling at Eureka Valley Recreation Center**

**100 Collingwood St. San Francisco CA 94114 Tuesday/Friday 6pm upstairs All Purpose MAT Room**

### **Basic Policies:**

1. Alliance Wrestling is funded and operated by Golden Gate Wrestling out of Eureka Valley Recreation Center, a 30 year old San Francisco 501c3 non-profit.
2. Alliance Wrestling is focused on FreeStyle/GRECO for San Francisco Bay Area high school aged Wrestlers ~12-18 years old.
3. Alliance Wrestling *-requires-* a USA Wrestling membership card in order to protect the Wrestler with a full medical policy, and the coaches/rec center with a liability policy. The card can be obtained on-line at <http://TheMat.com> . Look for membership, competitor, SF Bay Area, and Alliance Wrestling. The card is \$50 and is valid from September through September. Please print off a copy of the card to give to the coaches, and keep another copy with you when you come to practice. This card entitles the Wrestler to local/state/national competitions as well as insurance coverage.
4. USA Wrestling *-requires-* that Alliance Wrestling staff its practices with qualified certified adult coaches who have had background checks. Wrestlers need the permission of their parents and high school coach to practice with Alliance Wrestling.
5. All Wrestlers must have valid USA Wrestling cards with them.
6. If a Wrestler cannot afford the USA Wrestling card fee of \$50, Alliance Wrestling will purchase it.
7. To join the Alliance Wrestling email ListServ and be kept informed of the practice schedule, please send an email to: [AllianceWrestling-Subscribe@YahooGroups.com](mailto:AllianceWrestling-Subscribe@YahooGroups.com) . You will then receive an email invite and be subsequently added. You do not need a Yahoo email address to be added to the ListServ.
8. Once added to the ListServ, you can contact the coaches and the group by sending an email to: [AllianceWrestling@YahooGroups.com](mailto:AllianceWrestling@YahooGroups.com) . It is recommended that you send an email to this ListServ before each practice stating name, weight, age, skill level so others will be more motivated to get to practice.
9. '[Alliance Wrestling Team](#)' has a private/closed Group FaceBook page for parents to share comments, photos, and videos. Only parents & guardians of registered Wrestlers will have access.
10. Wrestlers will be given a rashguard T-Shirt to be worn at practice. Wrestlers should wear legitimate Wrestling Shoes and boardshorts or singlets. Jewelry, baggy clothes with pockets, barefoot, and street shoes are prohibited.
11. Alliance Wrestlers will be organized as a team to compete in local tournaments. Fees for tournaments will be paid by Alliance Wrestling.

**Thank You from the Coaches of Alliance Wrestling at Eureka Valley Recreation Center**



## Alliance Wrestling at Eureka Valley Recreation Center

Confidential Individual Wrestler Emergency Form (PLEASE PRINT or CIRCLE and Return to the Coaches)

**Wrestler's Name:** \_\_\_\_\_

**DOB (mm/dd/ccyy):** \_\_\_\_\_ **Age:** 12 13 14 15 16 17 18

**School Grade:** 7 8 9 10 11 12 **Tel#:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**eMail Address:** \_\_\_\_\_

**Experience:** \_\_\_\_\_

**School:** \_\_\_\_\_ **City:** \_\_\_\_\_

**High School Coach's Name:** \_\_\_\_\_

**Shoe:** 7 7.5 8 8.5 9 9.5 10 10.5 11 11.5 12 12.5 13

**RashGuard T-Shirt Size:** XS S M L XL **Weight (#lbs):** \_\_\_\_\_

**Health Issues:** asthma epilepsy allergies other:

\_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Guardian Contact Name:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_ **Tel#:** \_\_\_\_\_

**eMail Address:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_