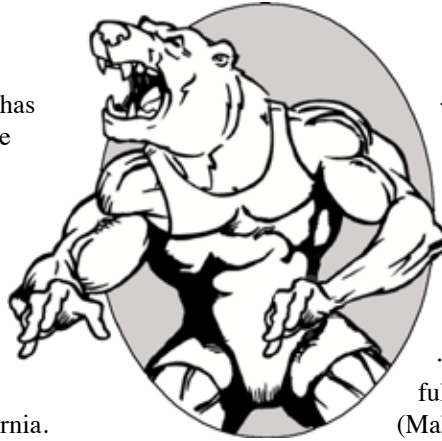



GOLDEN GATE WRESTLING MEMBERSHIP APPLICATION

GOLDEN GATE WRESTLING CLUB has been promoting amateur Olympic Freestyle wrestling as defined by FILA since 1982. GGWC is sanctioned and chartered by the California Chapter of USA Wrestling, the national governing body for competitive amateur wrestling for the USOC. GGWC is also a San Francisco city-sponsored activity and a member of Team San Francisco. GGWC is 501c3 non-profit organization operating in California.



- 
- Completion of Waiver/Release
 - \$40 membership fee to USA Wrestling, which includes a supplemental medical insurance policy covering injury at a sanctioned event or practice. Available at www.themat.com
 - \$60 balance for yearly Club dues are required in full by your third practice. Dues are not pro-rated. (Make checks payable to Golden Gate Wrestling)
 - Proper workout attire including wrestling mat shoes. We recommend members obtain the following gear for comfort and singlet, knee pads, headgear. These items can be purchased from the club.
- up with GGWC's Yahoo group for practice updates.
- Amt Paid:**

Amt Due:

Recd:

NO EXPERIENCE NECESSARY: GGWC provides Olympic Freestyle instruction for women & men OF all age and skill levels. Some of our experienced members participate in local and regional wrestling tournaments. We stress safety, proper technique, and most importantly fun.

PARTICIPATION REQUIREMENTS:

- Minimum age 18 (Ask us about **Alliance Wrestling** if younger than 18.)

PRACTICE SCHEDULE: Updates @ www.ggwc.org
100 Collingwood @ 18th, Eureka Valley Center
Tues & Fri 7-9 p.m. Saturday noon-2 p.m.

NAME: _____ USAW # _____

STREET ADDRESS: _____ BIRTHDATE _____
(mm / dd / yyyy)

_____ WEIGHT _____

CITY, STATE, ZIP: _____ T-SHIRT S M L XL
(circle one)

PHONE: _____ YEARS OF EXPERIENCE: _____
(000) 000-0000

EMAIL: _____

(please PRINT)

DO YOU PLAN TO COMPETE IN TOURNAMENTS: ☐ ☐
 YES NO

INJURIES/LIMITATIONS: _____

EMERGENCY CONTACT INFORMATION:

Name	Relation	Phone
------	----------	-------

GOLDEN GATE WRESTLING CLUB

WAIVER & RELEASE FROM LIABILITY/CONSENT FORM

I, _____, the undersigned, acknowledge and fully understand that Golden Gate Wrestling Club activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision, or expertise can eliminate. These inherent dangers include risks of serious injury, fractures, sprains, strains, contusions, dislocations, abrasions, infections, skin problems, bleeding, eye injuries, brain injuries, permanent, temporary, total or partial disability, disfigurement, paralysis and other losses to person or property, including death.

I understand that severe social and economic losses may result not only from my own action, inaction, or negligence, but also from the actions, inaction or negligence of others notwithstanding the rules of play of the condition of the premises or of any equipment used. I acknowledge and fully understand that the sport of wrestling requires extreme physical exertion which can place significant stress on my cardiovascular system, and other body functions, and that this stress may result in life-threatening medical emergencies or other risks of serious harm including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death.

I further acknowledge and fully understand that there may be other associated risks with such activities that are not known or not reasonably foreseeable at this time. I further acknowledge and fully understand that I must follow carefully all of the guidelines given by the coaching staff and vent organizers regarding training rules, safety procedures, proper use of equipment, legal and safe playing techniques and any and all other safety procedures. I understand that even in if all the above is done, I may still incur injury through participation in wrestling.

On behalf of myself, my heirs and next of kin, personal representatives, agents, insurers, successors, and assigns (all hereinafter "Releasors"), I hereby EXPRESSLY AND VOLUNTARILY ASSUME ALL RISKS ASSOCIATED WITH WRESTLING AND FOREVER RELEASE, DISCHARGE, AND COVENANT NOT TO SUE THE GOLDEN GATE WRESTLING CLUB, its coaches, its members, its insurers, its administrators, its agents, its directors, its officers, its volunteers, its employees, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, and if applicable owners, lessors, and operators of premises used to conduct any Golden Gate Wrestling Club event, practice, meet, or activity (all hereinafter "Releasees"), from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that Releasor may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at, preparation for, or traveling to or from any Golden Gate Wrestling club event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent, or obvious defects in the facilities or equipment used.

I ACKNOWLEDGE THAT I HAVE READ AND UNDERSTAND THE ABOVE STATEMENT.
I ASSUME ALL RISKS ASSOCIATED WITH WRESTLING.

Participant Signature _____ Date ____/____/____

Print Name _____ Date of Birth ____/____/____