



Join Us for our **25th Anniversary**  
Season in our new Wrestling Facility

**GRADES K - 8**

DO YOUR KIDS NEED A PHYSICAL  
OUTLET DURING THE WINTER  
MONTHS?

**WRESTLING IS THE PERFECT  
SPORT!!!**

### REGISTRATION

**DATE:** Wednesday - November 11th  
**TIME:** 6:00pm - 8:00pm

**LOCATION:** Elkhorn Wrestling Club Facility  
230 W. Evergreen Parkway  
(behind Charlie O's restaurant)

**COST:** Registration Fee:  
\$42.00 - First Year Wrestlers  
\$100.00 - Previous Year(s) Wrestlers  
\$20.00 - Discount per family per wrestler for two or  
more wrestlers. Does not apply for first year wrestlers.  
*Fee includes: USA Membership, Insurance  
& Team t-shirt*

HEADGEAR:  
is mandatory and can be rented for \$10 for  
the season.

### ONLINE REGISTRATION

Register online anytime between November 1st and November 15th.  
Just visit our website at [www.ElkhornWrestlingClub.com](http://www.ElkhornWrestlingClub.com). If you  
register online, a packet will be emailed to you that includes the  
schedule, handbook, etc.



- Many nights offered
- Small groups
- Short practices
- Early practice times

### Practice Times

#### Monday

K - 2nd - 5:30 - 6:45  
Advanced & 7th & 8th - 6:00 - 7:30

#### Tuesday

3rd, 4th, 5th & 6th  
5:30 - 7:00

#### Wednesday

Advanced & 7th & 8th - 6:00 - 7:30

#### Thursday

3rd, 4th, 5th & 6th  
5:30 - 7:00

### Any Questions:

Call Steve Hensel 262-749-0428

Email: [steve.hensel@elkhornwrestlingclub.com](mailto:steve.hensel@elkhornwrestlingclub.com)

Website: [www.ElkhornWrestlingClub.com](http://www.ElkhornWrestlingClub.com)

- K - 2nd Grades season lasts 6 weeks and ends before Christmas - First Practice is November 16th
- 3rd, 4th, 5th, 6th Start on December 1st.
- 7th, 8th & Advanced group Start on November 30th.

**MORE INFORMATION AVAILABLE AT REGISTRATION  
INCLUDING COMPLETE SCHEDULES AND CLUB HANDBOOK**

**MORE ON BACK** 

Wrestling Center Address:  
230 W. Evergreen Parkway  
Elkhorn, WI 53121

Mailing Address:  
P.O. Box 491  
Elkhorn, WI 53121

**INSTRUCTIONS FOR REGISTERING:** Please complete this registration form and bring it to open sign-up on Wednesday, November 11, 2009 at Elkhorn Wrestling Club Facility, 230 W. Evergreen Parkway between 6:00 p.m. to 8:00 p.m. In order to process your registration form, we must have ALL information complete, including signature and payment.

Parent/Guardian Information (PLEASE PRINT)

**Father** first name last name ( ) - ( ) - home phone cell phone e-mail address \*required

**Mother** first name last name ( ) - ( ) - home phone cell phone e-mail address \*required

**Emergency Contact Name** ( ) - ( ) - home phone alternate phone number relationship to athlete

**\*REQUIRED** as ALL information is sent via e-mail. Please check your e-mail at least weekly for important information.

Wrestler Information (PLEASE PRINT)

**Wrestler #1** first name last name age weight birth date / / (Circle One) NO YES, years  
Do you have past wrestling experience?

Current School Current Grade High School you are planning to attend

**Wrestler #2** first name last name age weight birth date / / (Circle One) NO YES, years  
Do you have past wrestling experience?

Current School Current Grade High School you are planning to attend

**Wrestler #3** first name last name age weight birth date / / (Circle One) NO YES, years  
Do you have past wrestling experience?

Current School Current Grade High School you are planning to attend

**Registrations received by November 15, 2009 include a T-shirt. Please indicate your size below.**

YS (8) YM (10-12) YL (14-16) AS AM AL XL XXL

YES NO I understand that appropriate gym clothes (t-shirt and athletic shorts) and wrestling headgear MUST be worn or my child(ren) will not be permitted to practice. Clean gym shoes or wrestling shoes are required.

YES NO I give authorization to the Elkhorn Wrestling Club to publish our names and phone numbers in the Club Directory.

YES NO I give authorization to the Elkhorn Wrestling Club to use photographs and name(s) of my child(ren) when needed to promote the Elkhorn Wrestling Club. This release authorizes the use of photos for slides, movies, newspapers, magazines, Elkhorn Wrestling Club website as well as for other public relations purposes. I am aware that any picture will serve as a positive reflection, both of the above name(d) athletes and of the Elkhorn Wrestling Club.

Signature of Parent/Legal Guardian: Date:

**For Club Use Only**

Amount \$ Check # or Cash receipt # Headgear #