Genoa Wrestling Club

Youth Registration: October 24, 2022

The Genoa Wrestling Club will be starting another exciting youth season. **To register for the Club and be a part of a fun, successful, and challenging program, please attend our Open Registration at the Genoa Athletic Complex on Monday, October 24th from 6:00-7:30 pm.** Registration is open to all area students from K (5 y.o.) through 6th grade. During registration, we will provide optional gear order information, weigh wrestlers, and will have wrestling shoes available to use via our shoe exchange program if interested.

You may register on-line at Genoa Biddy Registration Form or complete the form below. This form can be found at GenoaWrestling.com

The entry fee is $50 for the first family member and $30 for additional members. Each registered and paid wrestler will receive a FREE Genoa Wrestling t-shirt.

The season will start on Monday, November 7th. All practices will be on Mondays and Thursdays from 6-8 pm at the Genoa Athletic Complex. The season will run through February and starting in December, the team will attend optional team meets and tournaments. Meets are usually held on non-practice weekdays and tournaments occur on a Saturday or Sunday.

Coach Contact Info:

Scott Fuller, Head Coach
419-276-5805
fullerscott119@gmail.com

Samantha Fuller, GWC Secretary
419-708-0987
sreeves9507@gmail.com

See us on Facebook and Twitter @GenoaWrestling

Subscribe to Text Messages about GWC: Text the message ***@e0ca07*** to the number ***606-547-4927***.

Genoa Comet Biddy Wrestling Registration Form for 2022-2023 Season

Name: _____ **Parent/Guardian:**_____

Address: _____

City: _____ **State:** _____ **Zip:**_____

Home Phone:_____ **Work/Cell:**_____

Grade:_____ **Age:**_____ **Date of Birth:** _____ **School:**_____

Emergency Contact: _____ **Emergency Phone:**_____

Email Address(es):_____

(please provide e-mail addresses to receive season updates and news)

Years of prior wrestling experience? 0 1 2 3 4 5 6 7 8 (circle one)

T-Shirt Size Youth/Adult: YS (6-8) YM (10-12) YL (12-14) AS AM AL (circle one)

In appreciation of your acceptance of my registration, I agree to be legally bound for myself, my heirs, executors, and administers, waive and release Genoa Wrestling Club officers, coaches, and representatives, Genoa Area School employees and representatives, directors, workers, and all representatives from any and all claims of right to damages for any injury suffered by me directly or indirectly at Genoa Wrestling Club practices and events.

Parent/Guardian Signature _____ **DATE** _____

OFFICE USE ONLY	Paid Amount:	Cash or Check Number:	Singlet: Yes/No	Weight: