

2006 POWER PLANT MAT CLUB REGISTRATION FORM

NAME _____ AGE _____ WEIGHT _____

ADDRESS _____

CITY, STATE, ZIP _____

PHONE _____ E-MAIL _____

BIRTHDATE _____ SCHOOL _____ GRADE _____

Payment Options: Membership

\$5.00 per session – \$10.00/week for up to 3 sessions.....\$ _____

Payable in advance if desired - 1, 2, 3, 4 weeks (circle one) @ \$10.00 per week.....\$ _____

Do you have a 2006 USA Wrestling Card? Yes/ No (circle one)

If yes, USA CARD # _____

If No, please include \$30.00 for USA Card.....\$ _____

_____ Total Amount Included in this payment.....\$ _____

Note: Second participant in a family is half-price; No charge for third participant from the same family.

PLEASE MAKE CHECK PAYABLE TO: **POWER PLANT MAT CLUB, INC**

PLEASE HAND IN AT CLASS OR MAIL FORM AND CHECK TO:

**POWER PLANT MAT CLUB, INC
c/o 201 NORTH SECOND STREET
CLEARFIELD, PA 16830**

Please direct membership questions to: Peggy Durant at 814-765-4805

PARENT CONSENT AND WAIVER OF RESPONSIBILITY

In consideration of the Power Plant Mat Club acceptance of _____

(Print Student's Name above)

as a member of the Power Plant Mat Club, Inc.: It is agreed that the coaches, instructors, teachers and organizers are not responsible for any injuries. It is agreed that all risks attendant to watching and/or participating in club activities, including, but not limited to bodily injury, are assumed by the student and his parents and/or legal guardian and that this assumption is acknowledged, approved, and agreed to by said student and his parents and/or legal guardian as indicated by their signature set out below.

Signature (Parent/Legal Guardian)

Date _____