

Pee Wee Wrestlers and Parents

Pee Wee (3-6 Grade) wrestling will begin on **Monday, February 18, 2019**. Practices will be held in the HS Mezzanine.

Practices will be:

Monday 3:30 – 4:30 PM

Tuesday 3:30 – 4:30 PM

Thursday 3:30 – 4:30 PM

Wrestlers should be dressed in shorts or sweatpants and a t-shirt. If you do not own wrestling shoes, any athletic shoe will work.

There will be tournaments every weekend that you may go to—these are optional. Parents are in charge of transportations to and from the tournaments. Tournament information will be sent out as soon as possible.

Those wrestlers participating in tournaments will be issued a singlet and it MUST be returned at the end of the season. The singlets should only be worn for tournaments, not practice!

Program fee of \$20 and attached waiver must be submitted on the date of first practice. Make checks payable to Oakes Wrestling.

If you have any questions feel free to call Cory Schall at school, 701-742-3205 ext. 140.

Look forward to seeing you at practice!

Coach Schall

I, the undersigned, parent and/or legal guardian of the below-named wrestler, hereby authorize his/her participation in the Oakes Pee Wee Wrestling Program.

The undersigned also hereby releases, absolves, and indemnifies the Oakes Public School District and representatives, and the coaching staff from any and all claims of damages and/or injuries sustained as a result of the participation in the Oakes Pee Wee Wrestling Program.

The undersigned also hereby authorizes the coach to seek proper medical attention in case of injury if the parent(s), or legal guardian, is not available at the time of injury.

The undersigned hereby grants permission for wrestler named below to be included in photography or videotape by the Oakes Wrestling Program and hereby releases the Oakes Public School District and representatives, and the coaching and wrestling staff from any liability associated with such photography and/or other photographic media.

Wrestler: _____ Grade: _____

Signature of Parent/Guardian: _____

Parent/Guardian Cell #: _____

Email: _____

