

# Ramona Dawg Pound Youth Wrestling

## 24/25 Folkstyle Season Registration Form

### Wrestler Information

First Name	Middle Name	Last name
	<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Beginner Wrestler <input type="checkbox"/> Returning Wrestler
DOB(MM/DD/YYYY)	Gender:	
Allergies/Medical problems:		
Emergency Contact #1		Phone
Emergency Contact #2		Phone

### Parent/Guardian Information

First Name	M.I	Last Name	Relation
Home Phone		Work Phone	Cell Phone
Email			
First Name	M.I	Last Name	Relation
Home Phone		Work Phone	Cell Phone
Email			
Parents Signature			Date

Registration Fee \$150

USA Card \_\_\_\_\_ Received By \_\_\_\_\_