

\*\*Please write as clearly as possible.



## Contact Information

### Wrestler:

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_/\_\_\_\_/20\_\_\_\_

School: \_\_\_\_\_ Grade (2021-2022) \_\_\_\_\_

Wrestler Phone Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Wrestler Email: \_\_\_\_\_

Medical Concerns: \_\_\_\_\_

\_\_\_\_\_

### Parent/Guardian:

1) Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Email: \_\_\_\_\_

2) Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_

Email: \_\_\_\_\_

Notes: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*Please provide valid contact information for the student and the parent/guardian. This information is necessary to communicate with the wrestler and their parent/guardian.