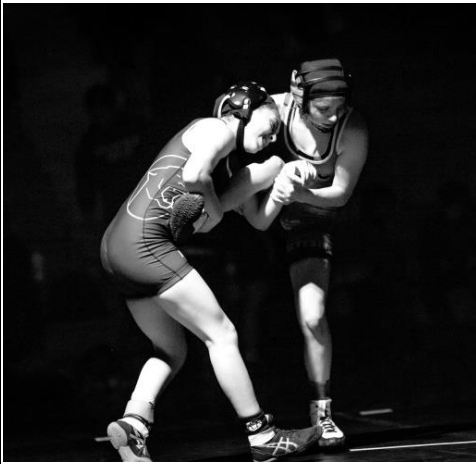




# Summer 2022 Wrestling Camp

**The toughest sport.  
The toughest athletes.**



**Guys  
&  
Girls**



**GIRLS CAMP  
\$100 Donation**

**Monday to Thursdays  
6:00pm to 7:30pm  
June 20 to July 14**

**BOYS CAMP  
\$150 Donation**

**Monday & Wednesday 4-6pm  
Tuesdays & Thursdays 4-5pm  
& Summer League 5:30 to 7:30pm  
June 20 to July 21**

**(Cash, Check, Card, VenMo) Includes team shirt**

**Makes checks payable to CVHS Wrestling Boosters**

For more information, please go to [www.CapoValleyWrestling.org](http://www.CapoValleyWrestling.org)

email at [CapoValleyWrestling@gmail.com](mailto:CapoValleyWrestling@gmail.com)

or call/text Coach Joshua Resnick 408-506-4417

Capo Valley Wrestling  
@CapoValleyWrestling



**venmo**

## Capistrano Valley Registration Form

<b>Name of Participant</b>		<b>Age</b>		<b>DOB</b>		<b>Grade</b>	
<b>T-Shirt Size (Circle):    XS    S    M    L    XL    XXL</b>							

<b>Parent(s)/Guardian(s) Names</b>	
<b>Parent(s)/Guardian(s) Phones</b>	
<b>Parent(s)/Guardian(s) Emails</b>	
<b>Parent(s)/Guardian(s) Address</b>	
<b>Emergency Contact (aside from parent/guardian)</b>	
<b>Emergency Contact Phone</b>	
<b>Emergency Contact Email</b>	

<b>Insurance Carrier</b>	
<b>Insurance Policy #</b>	
<b>HMP / PPO</b>	
<b>Allergies?</b>	
<b>Medical Conditions?</b>	
<b>Medications?</b>	

**How did you discover our programs?**

Please note that the Constitution of the State of California requires that we provide a public education to you free of charge. Your right to a free education is for all school/educational activities, whether curricular or extracurricular, and whether you get a grade for the activity or class. Subject to certain exceptions, your right to a free public education means that we cannot require you or your family to purchase materials, supplies, equipment or uniforms for any school activity, nor can we require you or your family to pay security deposits for access, participation, materials, or equipment.

**Capistrano Valley Wrestling High School Boosters, Big Kat Wrestling Club,  
Capistrano Valley High School and Capistrano Unified School District  
Sports Waiver and Release of Liability**

I/We, \_\_\_\_\_ (hereinafter "Parents/Guardians), the legal guardians of \_\_\_\_\_ (hereinafter "Student") sign this release of liability as a precondition for our child to participate in the Big Kat/Capo Valley HS Wrestling Club summer activities and camp held at Capistrano Valley High School, San Clemente High School, and various other locations within Southern California.

Student's parents (Parents/Guardians) acknowledge and agree that they must assess the risks involved in the participation of competitive athletics and make the choice to participate in spite of the potential risks of serious, catastrophic, and perhaps fatal consequences. Student and Parents/Guardians acknowledge and agree that no amount of instruction, precaution, or supervision will totally eliminate the risk of injury or of adverse medical consequences to the participating student. Participation in athletics is inherently dangerous and may be severely impacted by students existing medical conditions.

By granting permission to student to participate in athletic competition, Parents/Guardians acknowledge that playing or practicing a sport can be a dangerous activity involving many risks of injury. Both the Student and Parent/Guardians understand and agree that the dangers and risks of playing or practicing include, but are not limited to, death, complete or partial paralysis, brain damage, serious injury to virtually all internal organs, bones, joints, ligaments, muscles, tendons, and other aspects of the skeletal system, and the potential impairment of other aspects of the body, general health and well-being.

Student and Parents/Guardians acknowledge and agree that they have been warned and cautioned against the participation of Students in such activities. Nevertheless, in order to facilitate participation of Student in such activity, Student and Parents/Guardians, agree that if student does engage in Big Kat/Capo Valley HS Wrestling Club, Capistrano Valley High School Wrestling Booster, or Capistrano Unified School District events and activities including, without limitation, practices, conditioning sessions, athletic competition, games, or use of facilities provided at Capistrano Valley High School, Student and Parent/Guardians do so at their own risk.

**Student and Parent/Guardians agree that student is voluntarily participated in these activities and using school facilities and premises and assumes all risk of injury, illness, damaged or lost that might result, including, without limitation, injury, illness, or death. Student and Parent/Guardians agree on behalf of themselves (and their personal Representatives, Heirs, Executives, administrators, agents and assigns) to release and discharge Big Kat Wrestling Club, Capistrano Valley High School Wrestling Booster, or Capistrano Unified School District, their employees, agents, representatives, coaches, assistant coaches, officials, successors and assigns, any and all claims or causes of action known or unknown that may arise of student in such activities and/or the negligence of the Big Cat Wrestling Club, Capistrano Valley High School Wrestling Booster, or Capistrano Unified School District. This waiver and release of liability includes, without limitation, injuries which may occur as a result of Student's participation in any of the activities associated with athletic training and competition in practice or neglect instruction or supervision of student. This may also include the actions, and actions, or negligence, of other participants at the event.**

You acknowledge that you have completely read this waiver and release and fully understand it is a release of liability. You are waiving any right that you and may have to bring legal action or assert claim against Big Kat Wrestling Club, Capistrano Valley High School Wrestling Booster, or Capistrano Unified School District by reason of participation of Student in athletic activities.

Date	Student Printed Name	Student Signature
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Date	Parent/Guardian Printed Name	Parent/Guardian Signature
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