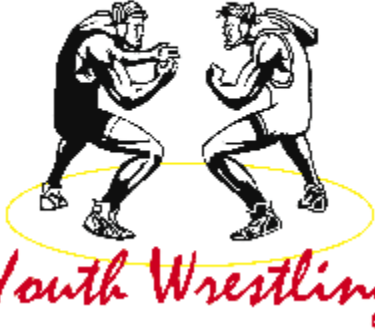


Haverford Township Recreation Department Youth Wrestling Team Registration Form

HAVERFORD
T.O.W.N.S.H.I.P



Grades 1-8

Dates: November 5, 2009 to March 11, 2010

Fee: \$90 for first wrestler, \$60 for siblings

(Discount for Middle School Wrestlers that are eligible)

For more information visit our website at: www.haverforyouthwrestling.org

Or call the Recreation Dept: (610) 446-9397

or Colleen Tavani at htpwrestling@yahoo.com

-Practices are Tuesday and Thursday nights from 6:30-8:00p.m. Starting on November 5, 2009

-Wrestlers will be grouped based on experience, age and ability

-Weekly Saturday Meets will begin in January 2010 and end with League Tournament in March 2010

-New wrestlers are expected to compete at the Haverford Youth True Novice Tournament on February 14, 2010

-Various Sunday Tournament opportunities will be available to all wrestlers

Parents Meeting: Wednesday, October 28, 2009

Location: 2325 Darby Road, Havertown, PA. 19083
Commissioners Meeting Room from 7:00-8:00p.m.

Meet the Coaches, Learn Details, ask questions & volunteer!

Please make checks payable to:

Haverford Township Recreation Department

Mail to:

599 Glendale Road, Havertown, Pa. 19083

Register by mail or bring this form and check to the Parent's Meeting

Wrestler Name _____ Date of Birth (month/date/year) _____ Grade _____

Address _____

Estimated Weight _____ #Years of Experience _____ Phone (home) _____

Parent/Guardian Name/s: _____

Parent/Guardian Email Address: _____

Medical Conditions or Other Information _____

Parent/Guardian Signature _____

****Your signature confirms the date of birth and school information as required by our league rules.***