

LIONS AGE GROUP WRESTLING CLUB PROGRAM

PROGRAM: Lions Kids' Wrestling is a program for elementary and middle school students that stress the fun and fundamentals of wrestling. The program also introduces competition with other clubs and provides a training site and schedule for the more experienced competitors. The program will run from November 17, 2009 through Mar. 4, 2010.

PRACTICES: The practices will be in the Vaughan Gym of the North Campus of Lyons Township High School. The development group will meet on Tues. and Thurs. nights from 6 – 7:30pm and the competition group will meet Tues., Wed., and Thurs. from 6-7:30pm. The first practice will be Tuesday, November 17th at 6:00 pm. A practice schedule and competition calendar will be passed out the first night.

AGES: Kids in 3rd through 8th grade living in the LYONS TOWNSHIP SCHOOL DISTRICT.

UNIFORM: Socks, tee shirt, elastic waist shorts, (NO CUT OFFS), and gym shoes or wrestling shoes.

REGISTRATION: 6pm to 7pm on **Monday, November 9th** and **Tuesday, November 10th** in the Vaughan Gym lobby of North Campus. Late registration, **Tuesday, NOVEMBER 17th** BEFORE THE FIRST PRACTICE 5:30-6pm. **We will have a parent meeting, Tues. 11/17 at the beginning of practice, 6pm.**

COST: **Development Group** is \$150, \$120 for each additional family member. This fee includes a tee shirt and IKWF, USA wrestling membership (\$40). **Competition Group** is \$250, \$220 for each additional family member. This fee includes tee shirt, USA membership (\$40) and a competition uniform (\$35). Please make checks payable to LTHS.

IMPORTANT NOTE: ALL first time REGISTRANTS MUST PROVIDE A PHOTOCOPY OF THEIR BIRTH CERTIFICATE AT THE TIME OF REGISTRATION.

Registration forms will be distributed to the feeder schools for Lyons Township High School.

COACHES: Mark King, Anthony Castillo, Ryan McMurray, LT coaching staff and LT wrestlers.

QUESTIONS: Call Mark King at 708-935-5382

LIONS AGE GROUP WRESTLING REGISTRATION (Please Print)

Name _____ Age _____ Date of Birth _____ Grade _____

ADDRESS _____ CITY: _____

ZIPCODE: _____ PHONE: _____ Birth Certificate _____

TEE SHIRT SIZE: **CIRCLE:** ADULT: S M L XL XXL **CHILD:** M L (Child XL = Adult S)

PAYMENT:

CASH: _____ CHECK# _____ AMOUNT: _____

The above child named has my permission to participate in the Lions Age Group Wrestling Program. I certify that the participant has had a current physical and has no physical limitations that would prevent him from participating in wrestling and associated activities.

DATE _____ PARENT/GUARDIAN: _____

