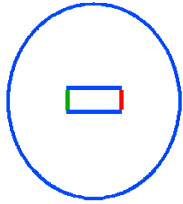


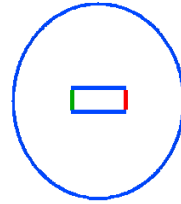
CARY MATMEN



WRESTLING CLUB

Cary Matmen IKWF Open VI  
December 20, 2009  
Cary Grove High School  
2208 Three Oaks Rd Cary IL 60013

CARY MATMEN



WRESTLING CLUB

**Registration:** Limited to First 500 wrestlers. Registration must include wrestlers NAME, AGE, WEIGHT, RECORD, and # OF YEARS WRESTLING.

**Pre-Paid Entry Fee:** \$15.00 per wrestler (Checks payable to Cary Matmen Wrestling Club), \$3 per adult, and \$2 per student, children under 6 free

**Coaches:** ID and IKWF card required at the gate for free Entry (first 3 per team).

**Divisions & Weights:** Folkstyle 8 & Under, 9 & 10, 11 & 12, 13 & 14 will be 4 man round robin 1,1,1 minute matches.

**Check-In:** 7:00 AM to 8:00 AM - Second Floor Wrestling Room. Wrestling at 9:00 AM

**Awards:** 1<sup>st</sup> thru 3<sup>rd</sup> Place Trophies, 4<sup>th</sup> Place Medallion & Award Platform (Pictures will be available online for FREE, see [www.carymatmen.org](http://www.carymatmen.org) after the tournament.)

**Team Registration:**

Deposit of \$50 by Dec. 1st

Full Team Registration and Pre-Pay by Dec. 10<sup>th</sup>

Register and Pay Online @ [www.carymatmen.org](http://www.carymatmen.org)

Or Register online and mail check to:

Cary Matmen WC  
C/O Jim Nelson  
28819 W Pitner Ave  
Cary, IL 60013

**Email Entries to:** Cary Matmen Wrestling Club at [info@carymatmen.org](mailto:info@carymatmen.org)

**Concessions:** Full concessions will be in the cafeteria, no food or drink allowed in the gyms.

**Questions:** Call Jim Nelson (847) 989-1171 or email [info@carymatmen.org](mailto:info@carymatmen.org)

**Web Site:** <http://www.carymatmen.org>

# Cary Matmen Open VI

## Individual Competitor Waiver

**Release - The undersigned wrestler and the parents or guardians of the wrestler hereby represent to the Cary Matmen Wrestling Club as a sponsor of the Cary Matmen Open, that the wrestler's health is and will be sufficient to allow the wrestler to safely participate in the tournament. The undersigned understands and accepts that no health examination will be conducted by the Cary Matmen Wrestling Club to determine the wrestler's fitness to participate in the tournament and that health and accident insurance coverage of the wrestler, if any, is the sole responsibility of the undersigned. The undersigned understands and accepts that the wrestler participates in the tournament at the wrestler's own risk. The undersigned understands and agrees not to make any claims or bring any lawsuit for personal injury, death, property damage, or loss which arise out of the wrestler's participation in the tournament against the Cary Matmen Wrestling Club, its Agents, Cary Grove High School, or C.U.S.D. #155. The terms "Cary Matmen Wrestling Club", "Cary Grove High School," and "C.U.S.D. #155" include the governing board of these entities and their officers, employees, and agents.**

Participant's Name \_\_\_\_\_

Club Affiliation Dundee Highlanders \_\_\_\_\_

Address \_\_\_\_\_

City/Zip \_\_\_\_\_

Home Phone \_\_\_\_\_

Emergency Phone Contact for 12/20/09 \_\_\_\_\_

Division \_\_\_\_\_ Grade \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

## Waiver and Release from Liability

1. I, \_\_\_\_\_, the undersigned, on behalf of myself, my heirs and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliated clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USA Wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

2. Releasor understands and acknowledges that USA Wrestling sanctioned activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any USA Wrestling sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used.

3. Releasor acknowledges and fully understands that each participant in any USA Wrestling sanctioned event, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and any other losses to person or property, including death, and that severe social and economic losses may result not only from Releasor's own actions, in actions or negligence, but also from the actions, in actions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Further Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time.

I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

\_\_\_\_\_  
(PARTICIPANT'S SIGNATURE)

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(PRINT NAME)

The undersigned, \_\_\_\_\_ does hereby represent that he/she is, in fact, the parent or legal guardian of \_\_\_\_\_  
\_\_\_\_\_ and acting in such capacity agrees to the terms and conditions of the above stated waiver and release.

\_\_\_\_\_  
(Signature of parent or legal guardian)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name)

\_\_\_\_\_  
(Relationship to minor)