

Hasbrouck Height Recreation Department  
320 Boulevard  
Hasbrouck Heights, NJ 07604  
Phone 201-288-4143 Fax 201-288-4356  
Email hhrec@aol.com  
Robert Brady, Director

2018-2019 WRESTLING REGISTRATION

Registration for the Recreation Department's Wrestling Program will be held on **WEDNESDAY, October 3rd & WEDNESDAY October 10<sup>th</sup> at the Recreation Department office, which is located at the Municipal Building at 320 Boulevard. Registration will be held from 7:00 p.m. to 9:00 p.m. you must bring a copy of your child's birth certificate to hand in at registration.**

**The program is open to all Hasbrouck Heights boys that were born in 2004 through and including 2011.** The boys will be taught the fundamentals and techniques of wrestling. The program consists of practices, clinics, matches against other towns, tournaments in which the boys can win medals, and other wrestling activities. In recent years, the Heights team has developed a reputation as one of the finest programs in the area and has had over 2,900 medal winners. In the program the team wrestles together but the boys only wrestle against other wrestlers close to their own age and weight. Numerous wrestlers from the program have gone on to excel in high school and college.

There will be a one-time registration fee of \$65. Please note that if you miss registration for any reason, you may still be able to register but a late charge of \$15 will be added to the registration fee. All wrestlers must be permanent residents of Hasbrouck Heights, which means they must live in Hasbrouck Heights or Teterboro all year round. Please note: wrestling practices will only be open to the wrestlers and coaches.

In the sport of wrestling it does not matter how much you weigh, there is always a spot for you to participate. If you need any further information please contact the Recreation Department at 288-4143

\*\*REGISTRATION FORM IS ON OTHER SIDE OF THIS PAPER. IT MUST BE COMPLETELY FILLED OUT AND SIGNED.

*H.H. REC. DEPT. IS NOT AFFILIATED WITH THE H.H. BD. OF ED.*

*You can follow HH Rec on Facebook and Twitter*

2018-2019 Wrestling Registration Form

Circle your shirt size:

Youth: medium large  
Adult: small medium large x-large

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

This coming season will be my child's \_\_\_\_\_ year of wrestling

DATE OF BIRTH \_\_\_\_/\_\_\_\_/\_\_\_\_ AGE \_\_\_\_ GRADE \_\_\_\_  
Month day year

Parent' Names: \_\_\_\_\_

Email Address: \_\_\_\_\_ Cell # \_\_\_\_\_

If your Child is also practicing at a wrestling "Club" please name the Club and the nights  
Your child practices at the Club.

Club Name \_\_\_\_\_ Practice Night \_\_\_\_\_

**COST: \$65.00 Due at Registration**

I hereby give my child permission to participate in the Recreation Department's Wrestling Program. I hereby certify and affirm that my child is a permanent resident of Hasbrouck Heights or Teterboro, lives in Hasbrouck Heights or Teterboro year-round. I also certify and affirm that the above information is true and correct and I realize that any falsification is punishable by law NJS 2c: 28-3. I also understand that my child is covered by a limited insurance policy with a deductible. As a wrestling parent I agree to abide by all rules and regulations set forth by the Recreation Department or their coaches. I also understand that practices are only open to wrestlers and coaches. I agree to support my child in a positive way that promotes good sportsmanship, I will teach my child to respect the coach and support his teammates in a positive way.

Parent's Signature: \_\_\_\_\_

\*\*INFORMATION ON WRESTLING PROGRAM IS ON THE OTHER SIDE OF THIS PAPER.

\_\_\_\_\_ OFFICE USE ONLY \_\_\_\_\_

Received by \_\_\_\_\_ date \_\_\_\_\_ amount \_\_\_\_\_ cash \_\_\_\_\_ check # \_\_\_\_\_