

# Lacey Mat Cats

LACEY YOUTH WRESTLING CLUB



Wrestler: \_\_\_\_\_  
(First Name) (Last Name)

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Approximate Weight: \_\_\_\_\_

First Year Wrestler: Yes \_\_\_\_\_ No \_\_\_\_\_

**If this is a first year wrestler, a copy of his/her birth certificate is required.**

Clothing Size: YS \_\_\_\_\_ YM \_\_\_\_\_ YL \_\_\_\_\_ YXL \_\_\_\_\_  
AS \_\_\_\_\_ AM \_\_\_\_\_ AL \_\_\_\_\_ AXL \_\_\_\_\_ AXXXL \_\_\_\_\_

Parent: \_\_\_\_\_  
(First Name) (Last Name)

Parent: \_\_\_\_\_  
(First Name) (Last Name)

\_\_\_\_\_  
(Signature)

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

I am interested in coaching \_\_\_\_\_