

N.B.W.C. Inc.

Oct. 5, 2007

Thank you for the interest you have expressed in the North Baltimore Wrestling Club. Our team is looking forward to an exciting eleventh year, and our fourth year as a part of the Upper Chesapeake Wrestling League.

This year, we will continue to have three teams: the Novice Team (practicing at Friends), our Intermediate Team (practicing at Gilman), and an Advanced Team (practicing at Loyola Blakefield).

We will have a Nov. 1 start date, with a modified schedule for the Novice Team in the first two weeks due to facility availability. I will alert you by email as soon as I have the full match schedule confirmed, and it will also be available on the team web site (see below). Please update your email address on the application, and check the box if email is not an effective way to reach you. Our team makes all announcements by email, and we need to know if you will not see them.

Enclosed are registration materials, which we ask you to fill out *completely* and return immediately. Please use the checklist below to make sure everything is complete before you send it in

Keep an eye on the team web site at www.eteamz.active.com/northbaltimore (click on the team picture to reach to the full site) for the most updated information, as well as information on match schedules, and wrestling equipment information.

See you in three weeks,

Coach Spawn

Please follow this checklist when you return your application by mail

- Fill out and return** the *Application to the North Baltimore Wrestling Club*
- Fill out and return** the *Medical Statement*
- Fill out and return** waivers for **all three** schools, regardless of what team you plan to be on
- Fill out and return** the *volunteer form*
- Fill out and return** the *USA Wrestling membership application*
- Include** a check for \$75.00, payable to **North Baltimore Wrestling Club, Inc.** (Contact Andy Spawn at 410-467-4289 for information about scholarships which are available)
- Fill out and return** a gear order. Add the cost of this gear to your registration check.
- Keep** the practice calendar

**Application should be returned to: Andy Spawn 4705 Keswick Rd.
Baltimore, MD 21210**

Application to the North Baltimore Wrestling Club

Please complete EVERY line and ALL forms

Please print neatly, and securely attach your check, Medical Statement, school waivers, USA Wrestling membership application and your gear order to this form.

Name of participant: _____

Age: _____ Date of birth: _____ School: _____ Grade _____

Tshirt size _____ Choose from: YS (6-8), YM (10-12), YL (14-16), AS, AM, AL, AXL

Name of parents: _____

Mailing address: _____

(Please complete fully) _____

Phone numbers

Home: (_____) _____ Work: (_____) _____

Cell (if applicable): (_____) _____

Email _____

Check this box if you do not have/don't read email

Additional contact person (non-parent): _____

Phone (_____) _____

All participants must have complete paperwork on file with the N.B.W.C. and a USA card to participate in any practices or matches. This application must be accompanied by a \$75.00 check (payable to North Baltimore Wrestling Club, Inc.) to cover the registration fee, and all additional forms.

All participants are expected to behave with dignity and show good sportsmanship at all team events and practices. Repeated infractions will result in cancellation of membership.

Team use only

_____ USA registered

Card number: _____

NBWC Medical Statement and Friends School Waiver of Liability

Child's name _____

Must be completed by Parent(s) or Guardian

A) Is your child currently taking any medication on a regular basis?

Yes _____ No _____

Parent(s) are responsible for dispensing medication directly to their child.

B) Does your child have special needs, health problems, or allergies of which the school should be aware?

Yes _____ No _____

C) Does this child have any medical problem or condition of which the coaches should be aware?

Yes _____ No _____

D) Do you consider this student to be physically able to engage in wrestling?

Yes _____ No _____

E) List any allergies: _____

F) By my signature below, I am giving consent for my child to engage in wrestling activities. I hereby approve of the terms of this registration form/contract. I further agree to indemnify, defend, and hold Friends School of Baltimore, Maryland, its trustees, faculty, employees and agents, harmless from any injuries that may be sustained while participating in the above named activity.

I hereby acknowledge that I have read and fully understand the above mentioned facts. I further certify that all answers, to the best of my knowledge, are true and correct.

Signature of Parent or guardian: _____ **Date** _____

Name of Participant: _____ **Date** _____

GILMAN SCHOOL, INC.
WAIVER OF LIABILITY

PLEASE FILL OUT EVEN IF YOU DO NOT EXPECT TO PRACTICE AT GILMAN

The undersigned exempts and releases Gilman School, Inc., its trustees, officers, agents, servants, and employees, from any and all liability, claims, demands, actions, causes of actions, or damages whatsoever arising out or relating to any damage, loss or injury to the undersigned or the undersigned's property while upon the premises of the School or while participating in any of the activities giving rise to the undersigned's presence on the School's property, whether such loss, damage or injury results from the negligence of the School, its trustees, officers, agents, servants and employees, or from some other cause.

Name of child

Parent's signature

GILMAN SCHOOL, INC.

Loyola Blakefield WAIVER --- Please Print

Please fill out even if you do not expect to practice at Loyola Blakefield

Wrestler Name _____

Date of Birth _____ Grade _____

Address _____

City _____ State _____ Zip _____

School _____ Email _____

Parent/Guardian Name _____

Home # _____ Work# _____

Email _____

Health Concerns _____

Physician _____ **Phone** _____

Emergency Contact _____ # _____

In the event that the emergency contact cannot be reached, I authorize Loyola to permit such treatment, as the attending physician may deem necessary, including surgery. It is hereby understood that you will hold Loyola Blakefield harmless against any claim of liability and to any person or persons for personal injury or property damage in connection with your child's use of the facility. In addition, you will hold Loyola Blakefield harmless from any such claim by others and will release Loyola Blakefield and the North Baltimore Wrestling Club from any such liability to your child or anyone else.

Please Print Name: _____ **Date:** _____

Signature: _____

Volunteer form (NOT optional)

North Baltimore Wrestling Club is a 100% volunteer organization, and depends on the enthusiastic participation of its members' families to provide the highest quality practices and events. Please indicate below how you will be able to help:

_____ **Assisting the coaching staff at practices**

_____ **Selling concessions at some tournaments or matches**

_____ **Score keeping at some tournaments or matches**

_____ **Clerical assistance at practices**

_____ **Team statistics**

If there are other tasks you would like to take on in addition to those listed above, please add them here:

Thank you, on behalf of all the coaches. We cannot run this team without you!

Andy Spawn

MARYLAND STATE WRESTLING ASSOCIATION

**U.S.A. WRESTLING-INDIVIDUAL/TEAM MEMBERSHIP
APPLICATION
2007/2008**

Please print neatly

NAME: _____

ADDRESS: _____

CITY/TOWN: _____ **STATE:** ____ **ZIP CODE:** _____

TELEPHONE: (____) _____ **BIRTH DATE:** ____/____/____

GENDER: _____

CLUB AFFILIATION: North Baltimore Wrestling Cub .

Email address: _____

PLEASE CHECK ONE CATEGORY:

Wrestler: _____

Coach: _____

Official: _____

Signature of Applicant: _____

Signature of Parent/Guardian: _____

(If under 18 years of age)

FOR OFFICIAL USE ONLY

U.S.A. WRESTLING CARD NUMBER: _____

CLUB CODE: _____

NBWC Practice Schedule 2007-8

Keep this sheet for reference when you return your application!

Novice practice (at Friends)– First and second year elementary-aged wrestlers. Novice practice runs 6:30-7:45.

Intermediate practice (at Gilman) – Third year elementary and **all** middle-school aged wrestlers
Practice runs from 6:15-8:00.

Advanced practice (at Loyola Blakefield) - Advanced Travel team members **ONLY**. Practice 6:15-8:00.
Be on time!

<i>Su n</i>	<i>Mon</i>	<i>Tues</i>	<i>Weds</i>	<i>Thurs</i>	<i>Fri</i>	<i>Sat</i>
NOVEMBER						
				1 Novice practice – AT GILMAN, NOT FRIENDS Intermediate practice – Gilman Advanced practice – Loyola Blakefield	2	3
4	5 Advanced practice – Loyola Blakefield	6 Intermediate practice – Gilman	7 Novice practice – AT GILMAN, NOT FRIENDS Advanced practice – Loyola Blakefield	8 Intermediate practice – Gilman Advanced practice – Loyola Blakefield	9	10
11	12 Advanced practice – Loyola Blakefield	13 Novice practice – at Friends Intermediate practice – Gilman	14 Advanced practice – Loyola Blakefield	15 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	16	17
18	19 Advanced practice – Loyola Blakefield	20 Novice practice – at Friends Intermediate practice – Gilman	21 Advanced practice – Loyola Blakefield	22 THANKSGIVING	23	24
25	26 Advanced practice – Loyola Blakefield	27 Novice practice – at Friends Intermediate practice – Gilman	28 Advanced practice – Loyola Blakefield	29 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	30	Dec. 1

<i>Su n</i>	<i>Mon</i>	<i>Tues</i>	<i>Weds</i>	<i>Thurs</i>	<i>Fri</i>	<i>Sat</i>
DECEMBER						
2	3 Advanced practice – Loyola Blakefield	4 Novice practice – at Friends Intermediate practice – Gilman	5 Advanced practice – Loyola Blakefield	6 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	7	8
9	10 Advanced practice – Loyola Blakefield	11 Novice practice – at Friends Intermediate practice – Gilman	12 Advanced practice – Loyola Blakefield	13 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	14	15
16	17 Advanced practice – Loyola Blakefield	18 Novice practice – at Friends Intermediate practice – Gilman	19 Advanced practice – Loyola Blakefield	20 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	21	22
23	24	25	26	27	28	29
30	31 Winter	holiday	Practices will be	Announced	for each	team
JANUARY						
		1	2	3	4	5
6	7 Advanced practice – Loyola Blakefield	8 Novice practice – at Friends Intermediate practice – Gilman	9 Advanced practice – Loyola Blakefield	10 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	11	12
13	14 Advanced practice – Loyola Blakefield	15 Novice practice – at Friends Intermediate practice – Gilman	16 Advanced practice – Loyola Blakefield	17 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	18	19
20	21 Advanced practice – Loyola Blakefield	22 Novice practice – at Friends Intermediate practice – Gilman	23 Advanced practice – Loyola Blakefield	24 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	25	26

27	28 Advanced practice – Loyola Blakefield	29 Novice practice – at Friends Intermediate practice – Gilman	30 Advanced practice – Loyola Blakefield	31 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	Feb 1	Feb 2
FEBRUARY						
3	4 Advanced practice – Loyola Blakefield	5 Novice practice – at Friends Intermediate practice – Gilman	6 Advanced practice – Loyola Blakefield	7 Intermediate practice – Gilman Advanced practice – Loyola Blakefield	8 Novice practice – at Friends	9
10	11 Advanced practice – Loyola Blakefield	12 Novice practice – at Friends Intermediate practice – Gilman	13 Advanced practice – Loyola Blakefield	14 Novice practice – at Friends Intermediate practice – Gilman Advanced practice – Loyola Blakefield	15	16
17	18 Advanced practice – Loyola Blakefield	19 Intermediate practice – Gilman	20 Advanced practice – Loyola Blakefield	21 Intermediate practice – Gilman Advanced practice – Loyola Blakefield	22	23
24	25 Advanced practice – Loyola Blakefield	26	27 Advanced practice – Loyola Blakefield	28 Advanced practice – Loyola Blakefield	29	Mar. 1
MARCH						
2	3	4	5	6 Wrestling banquet – at Friends 7:00-9:00	7	8

Parking at Gilman Enter from eastbound Northern Parkway between Roland Avenue and Charles St. Park in the spaces furthest in (Park in the spaces – **do not** leave your car in the traffic circle by the steps – it is a fire lane) and climb the steps to the Finney Arena. Pass the main doors and make a left to enter a set of double doors into a hallway. Climb the steps on your right to the Gilman Wrestling Room.
Please do not drive up the ramp to the arena, or attempt to drive across the campus from Charles Street to the rear parking area – enter off of Northern Parkway, and park only in the lower parking lot.

Parking at Friends Enter from Charles Street and proceed down the main drive. Make a right turn into the large parking lot before the traffic circle. Park in the lot, and walk around the New Middle School to the Gym complex. Enter the cafeteria to the right of the main Gym complex. Make a left into the Wrestling Room on the far side of the Cafeteria.

We encourage parents to stay and watch practice every night! A lot of information is given at practice about upcoming matches, changes in schedule, etc.

Parents should be aware that Gilman, Friends, and Loyola Blakefield are smoke-free campuses

North Baltimore Wrestling Gear Order Form

Wrestler: _____ **Parent:** _____

Practice location: Gilman: _____ Friends: _____ Loyola: _____

Please **write** and **circle** the size requested. If you have more than one child, list both names and circle the sizes. Total the cost at the end of each line and at the bottom.

Singlet: _____ Choose from: YS (40-60 lbs), YM (60-75 lbs), YL (75-90 lbs),
AXS (90-110 lbs), AS (110-130 lbs), AM(130-155 lbs), AL(155-185 lbs)
Color: _____ Red (Novice and Intermediate teams)
_____ Blue (Advanced team)

\$38.00 _____

Shorts: _____ Choose from: YS, YM, YL, AS, AM, AL,
AXL, AXXL

\$15.00 _____

T-shirt: _____ Choose from: YS, YL, AS, AM, AL

\$17.00 _____

(Underarmour Tight Style – follow regular t-shirt sizing)

Hooded Sweatshirt: _____ Choose from: YS, YM, YL, AS, AM,
AL, AXL, AXXL

\$18.00 _____

Please make checks payable to North Baltimore Wrestling Club

TOTAL _____

The gear is custom printed and embroidered. It is extremely important all sizes are correct on the order. The ordering deadline is **NOVEMBER 14, 2006**. A second order may be placed in mid-December, but the items will not be received until after January 1, 2006 and there is no guaranty of the availability for the singlets. Please contact Jack or Teresa Melocik at (410) 821-0709 or teresamelocik@msn.com with questions.