



# MISSION/CHARLO/DIXON LITTLE GUY/MIDDLE SCHOOL WRESTLING 2012

**Annual Parents Meeting and Sign Up:** Sign Up will be coming to each town:

- Dixon: February 7- Sign up at the Dixon School
- St. Ignatius: February 7-Tuesday 6:00-7:00 at the Middle School Commons
- Charlo: February 8- Wednesday 6:00-7:00 at the Charlo Lunch Room

We will hand out practice schedules and other important information at this meeting. Parents please plan on attending the meeting and letting us know what you will be willing to help with. We will need a lot of help with our tournament and duals. The club will need help with table workers, bracket stage workers, refs, coaches, pairings and hospitality room. Sweatshirts can be ordered at this time. They must be paid for the night of sign ups. It's going to be a great year!

**Wrestlers Need:** \$20.00 Club Fee paid and wrestling shoes. Club singlets and equipment will be checked out to each wrestler at the beginning of the season and must be returned at the end of the season. If you have singlets at home, please bring them in. If you have old wrestling shoes at home please bring those in so we can run a good shoe exchange. We will have a box of shoes and if everyone turns in old shoes it will really help keep all of our wrestlers in shoes without cost. We will have a shoe exchange on February 14 in the wrestling room.

**First Practice:** The first practice will begin on Tuesday, February 14<sup>th</sup> in the wrestling room, located above the St. Ignatius high school gym. Middle/Juniors will be from 3:45-5:30 ; Novice 5:30-6:30 Beginner 6:30-7:30

Beginners: Age 7-8

Novice: Age 9-10

Middle: Age 11-12

Junior: Age 13-15

All ages are based on a wrestler's age on Jan. 1, 2012.

**LET'S GET READY TO WRESTLE!!!**

For more information call:

Jason Sargent 745-3811 ext. 301, 396-7839

Lyle Cronk: 210-0887

**Mission Charlo Dixon**

# Little Guy Wrestling Permission Form

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Athletes Name: \_\_\_\_\_ Age as of 1/1/12: \_\_\_\_\_

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

I, as parent/guardian of the above named athlete, give my permission for this individual to participate in Mission Little Guy Wrestling. I agree to abide by club the club rules.

I granted permission for any Mission Little Guy Wrestling coach to provide first aid/emergency care to my son/daughter in the event that I cannot be reached.

I grant permission for the above named individual to attend practices and out of town contests, when scheduled. I fully accept all medical and insurance responsibilities during the 2012 wrestling season.

Parent/Guardian Name: \_\_\_\_\_

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

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

Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy#: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

I can help with:    Coaching    Table Workers    Bracketing    Pairing    Concessions

(Circle)                      Practice Help    Hospitality Room    Runner

There has been a Little Guy Bylaw change this year that parents need to be aware of. We pay insurance on every coach we have. We must list those coaches on the insurance policy. These coaches will be the only coaches allowed on the mat in any tournament. I will be distributing wristbands to these coaches at every tournament. If you are interested in coaching I need to be notified so you can be added to the insurance. I will also need these coaches to attend practice so all coaches know what is being taught. Thanks for your help with this.

