



Central Okanagan Wrestling Association Registration Form

Part 1) Medical Information

*For the health, safety and comfort of the participants, it is required that this form be filled out accurately. Please answer **all** questions.*

Name: _____ Age: _____ Sex: _____

Address: _____

Parent's Postal Code: _____ Parent's Phone Number: _____

Parent's Email Address: _____

School: _____ Grade: _____

Emergency Contact Other than parent:

Name: _____ Relationship: _____ Phone: _____

Name of doctor: _____ Phone: _____

Medical #: _____ Birthdate: mm/dd/yy ___ / ___ / ___

Medication: *If wrestler uses medication, please list below*

Generic Name: _____

Dosage: _____

Time Given: _____



Allergies: *Is this person subject to allergies?* Yes: _____ No: _____

Specific Allergies: _____

Treatment Required: _____

Is this person epileptic? Yes: _____ No: _____ *If yes, elaborate on the type, frequency, any factors likely to cause seizure, and the effectiveness of:*

Medication: _____

Is this person a Diabetic? Yes: _____ No: _____

If yes, please indicate any special dietary info:

Has this person received a tetanus immunization: Yes: _____ No: _____

If yes, when? _____

Please list any precautions or physical limitations that may affect your child's full participation and learning. I.e. joint problems, previous injuries, medical conditions, etc. If you have any other information that may be of assistance to the coaching staff, we would appreciate if you would inform us:



Part 2) Information & Policies Of The Central Okanagan Wrestling Association

General

- 1) COWA is an athletic association and thus encourages healthy habits. Therefore, at no time will the possession of tobacco products, vaping products, alcohol products, marijuana products, and/or illicit drugs be tolerated. **Note that this is a zero-tolerance policy.** Any wrestler found in possession of such products during events supervised by COWA will be expelled from the association. Any wrestler who is taking a controlled drug as part of a legitimate medical treatment or therapy must notify his/her coach of this situation.
- 2) The wrestlers must follow the instructions of coaches concerning practice procedures and event behavior. Failure to follow such instructions will result in expulsion from COWA.
- 3) All wrestlers are expected to be punctual, cooperative and considerate.
- 4) Wrestlers are **expected to be physically fit** enough to safely participate in COWA activities. Wrestlers with unusually low fitness levels may be suspended until their fitness levels improve. Wrestlers with chronic injuries will require clearance from a doctor before they can participate.
- 5) Attendance at practices for senior club members is mandatory if you wish to attend tournaments.
- 6) Appropriate clothing must be worn to practice.
- 7) All wrestlers must be accompanied by a COWA certified coach at all practices, tournaments, and while travelling to tournaments outside of the School District #23 area.

Organization

COWA is run by parents/guardians of the wrestlers and volunteers through a five-person executive team, various board positions, and a fundraising committee. There are meetings to discuss the association's activities.



Out Of Town Events

Wrestlers may not leave event venues or team accommodations without the expressed permission of the coach. In general, parents, relatives and friends may visit you at the venue site/team accommodation but you may not leave to visit with them.

Curfew will be at 11:00 pm unless otherwise stated. This means lights out and asleep by 11:00 pm. **COWA arranges accommodations and transportation in rental vehicles by executive approved drivers for out of town events. By travelling as a group in rental vehicles we reduce the cost per wrestler, have more liability insurance and allow all wrestlers to participate.**

A permission form with all trip information will be sent home for all tournaments. It must be returned by the deadline with the required funds and parental/guardian signature in order for the wrestler to be considered for the tournament.

All wrestlers on the team participate in warm-up each day of a tournament, regardless of if they are still in the tournament.

Coaches

All of our coaches are **volunteers. Any verbal or physical abuse of them will result in expulsion from COWA.**

All of our coaches are certified or are in the process of being certified through the National Coaching Certification Program (NCCP). All coaches must have an up-to-date RCMP Criminal Record Check on file with COWA.

COWA is always looking for more coaches, so if you know of any person or if you would like to train as a coach, please email: cowawrestling@hotmail.com

Refunds

All fees will be refunded if the wrestler has attended only two or less practices for the season.

National Championships

The club **may choose** to sponsor a wrestler to their National Championships if they attend **all practices and show their training book to their Head coach once a week.** Wrestlers that win the Western Age Class or BC High School Provincial tournaments will be given higher priority.



Photo usage consent

You have the option to allow COWA to use your child's photograph publicly to promote the club and sport of wrestling. The images may be used in publications, presentations, websites, and social media. There is no royalty, fee or other compensation that shall become payable in the usage of these. At any time, I may contact the club to update this information.

Parent Code Of Conduct

I will:

- Support my child with positive encouragement
- Respect and adhere to the ideals, policies, and rules determined by the Central Okanagan Wrestling Association, BC School Sports and the Canadian Amateur Wrestling Association
- Maintain self-control at all times
- Encourage my child to attend as many games/practices as reasonably possible in a timely manner. I will also notify the coach/manager ahead of time of any absences
- Respect the facilities, either home or away, in which my child is privileged play
- Show respect for the decisions, judgment and authority of the officials and timekeepers
- Show respect for the feelings and accept the capabilities of my child, or my child's teammates and players on the team
- Exhibit a high degree of sportsmanship, teamwork, and positive attitude at all times when representing my child and the association
- Avoiding confusing my child by coaching from the stands
- Refrain from expressing my opinion of the coaches or players in front of my own child
- Refrain from using foul language towards other parents, coaches, officials or opponents
- Refrain from yelling at or threatening referees, opposing players or coaches before, during, or after games/practices
- Refrain from demonstrating frustration or anger after a loss or poor performance
- Not physically abuse any other person
- Refrain from approaching the bench during a game situations unless summoned by a coach
- Accept defeat gracefully... love the game above the prize



Acknowledgement of COWA Information & Policies

In consideration of enrolment in the Central Okanagan Wrestling Association, I waive and release any and all rights of claim for damages I may have or acquire against COWA and its officers, agents, servants and employees for any and all injuries, infections, and sickness suffered by me and I acknowledge the rules laid down by COWA governing its operation and that it remains the sole responsibility of the participant to act and govern himself/herself in such a manner as to be responsible for his/her own safety.

I am aware that members of the Central Okanagan Wrestling Association will email or call me in regards to any aspect of running the club that involves my child.

All participants under the age of 19 must obtain parent(s) or guardian(s) consent in the space below:

Consent: I _____ do hereby declare that I am a parent or legal guardian of the above participant of COWA and that I have fully read, understand, and agree to the details outlined in the Information & Policies.

Athlete Name: _____

Athlete Signature: _____

All Parent/Guardian Name(s): _____

Parent/Guardian Signature(s): _____

Parent/Guardian(s) Alternate Phone: _____

Date: _____

____ **Yes**, I give my consent for COWA to retain, use and publicly disclose my child's image for purposes outlined in the Information & Policies. I hereby release and discharge all parties from any and all claims and demands. I understand that images posted on the internet may be stored and accessed outside of Canada.

____ **No**, I do not give my consent to the use and disclosure of my child's image for the purposes outlined in the Information & Policies.

I understand that I may rescind this permission by contacting: cowawrestling@hotmail.com