

Everett School District No. 2
WRESTLING SAFETY GUIDELINES
High/Middle School

This school strives to protect each student from possible injury while engaging in school activities. The guidelines and/o practices identified below have been established for this activity in order to protect the student and others from injury and/o illness. Participants and their parents should recognize that conditioning, nutrition, proper techniques, safety procedures, and well-fitting equipment are important aspects of this training program. Each participant is expected to follow the directions/standards of the coach.

Travel to and from off-campus facilities shall be in accordance with the directions of the activity coach.

Guidelines are as follows:

1. **Make certain that you wear all equipment that is issued by the coach. Advise the coach of any poorly fitted or defective equipment.**
2. **Advise the coach if you are ill or have any prolonged symptoms of illness.**
3. **Advise the coach if you have been injured.**
4. **Engage in warm-up activities prior to strenuous participation.**
5. **Be alert for any physical hazards in the locker room or in or around the participation area. Advise coach of any hazard.**
6. **Recognize illegal holds as defined by the rulebook.**
7. **Wear approved, proper-fitting apparel when wrestling with an opponent, either in practice or in a match.**
8. **Wrestle a safe distance from all walls and other obstructions. All wrestling will be done on the mats provided for wrestling.**

The above information has been explained to me and I understand the list of rules and procedures. I also understand the necessity of using the proper techniques while participating in the wrestling program.

I am aware that wrestling is a **high-risk sport** and that practicing or competing in wrestling will be dangerous activity involving **many risks of injury**, including but not limited to those risks outlined above.

Because of the dangers of wrestling, I recognize the importance of following coaches' instructions regarding techniques, training and other team rules, etc. and to agree to obey such instructions.

_____ Date: _____

Athlete's Signature

_____ Date: _____

Parent's/Guardian's Signature

Please Print Name: _____ Student ID _____

Office use only:

Emergency/Physical:

Yes

☐

No

☐

Academics:

Yes

☐

No

☐

Eligibility/Parent Permission/Athl Code:

Yes

☐

No

☐

ASB Card:

Yes

☐

No

☐

Please Print Name: _____ Student ID _____

Office use only:

Emergency/Physical:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Academics:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Eligibility/Parent Permission/Athl Code:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	ASB Card:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>