



## Release of Liability

This agreement releases **Wright Way Wrestling (WWW) and all their Coaches** at the physical location **7368 Twin Beech Drive Indianapolis, IN 46226** from all **liability** relating to Coach Brandon Wright and WWW, including financial responsibility for injuries incurred, during the practice held.

I also acknowledge the risks involved in the sport of wrestling. These include but are not limited to head, neck, shoulder, wrist, elbow, knee, back etc. I swear that I am participating voluntarily, and that all risks have been made clear to me. Additionally, I do not have any conditions that will increase my likelihood of experiencing injuries while engaging in this activity.

By signing below I forfeit all rights to bringing a suit against Coach Brandon Wright and WWW for any reason. In return, I will receive the opportunity for full participation in activity. I will also make every effort to obey safety precautions as listed in writing and/or as explained to me verbally. **I will ask for clarification when needed.**

I, \_\_\_\_\_, (name of athlete) fully understand and agree to the above terms.

Please sign below if you agree to the terms.

\_\_\_\_\_  
(Athlete or Parent/Guardian if under 18) \_\_\_\_\_  
Date

### 1. EMERGENCY CONTACT

Name/Relationship: \_\_\_\_\_

Phone Number/ Email: \_\_\_\_\_

Any limitations, illness, injuries etc (ex: inhalers, knee surgery, vision issues etc):

\_\_\_\_\_  
\_\_\_\_\_