



HANOVER ELEMENTARY YOUTH WRESTLING REGISTRATION FORM



This 2018-2019 season we expect our team to continue to grow because of our quality wrestlers, staff, and parent volunteers. This year we will be starting the season with practice on **November 19, 2018**. Head Coaches, Andy Beckner and Jon Beckner and their coaching staff will allow all participants the opportunity to have fun, make friends, learn wrestling fundamentals, and compete. All participants are paired based on weight, age, and skill level. Coach Beckner will place participants in groups (Orange-Novice and Black-Advanced) based on skill level. Non-Hanover tournaments will take place but are not required. Our Parent Organization will organize parent meetings, newsletters, and schedules.

SIGN-UPS will be at the Hanover High School wrestling room on **Monday, October 15th, Wednesday, October 17th, and Tuesday, October 23rd from 6 p.m.-7 p.m.** There will be a **PARENT MEETING on Monday, December 3rd at 6:30 pm** at the Hanover High School. This meeting will highlight the complete schedule, uniforms, volunteers, fundraising, and information for new parents. All parents are highly encouraged to attend to receive important information regarding your wrestler(s) and the program.

Please visit our website (www.hanoveryouthwrestling.com) or our Facebook page (Hanover Youth Wrestling) for up to date information.

**** Join us on November 14, 2018 from 6 p.m. – 7 p.m. for a FREE wrestling clinic. No registration required ****

PROGRAM	DATES	TIMES	LOCATION	AGES	FEE	REGISTRATION	STAFF
Hanover Youth Wrestling	11/19/18 – 2/2019	Monday & Wednesday	Hanover High Wrestling Room	Grades K – 6 th	\$40.00 HPSD Student	Registration must occur prior to Jan. 1 st to be eligible for league meets and tourney	Andy Beckner and staff
		Orange: 6-6:45 and Black: 6:45-8 pm			\$60.00 Out of District Student		

Participant's Name(s): _____

Age: _____ Birth Date: _____ Grade: _____ Previous Yrs. Experience _____

Name of School Participant Currently Attends: _____

T-Shirt Size (circle): YS YM YL AS AM AL

Short Size (circle): YS YM YL AS AM AL

Parent/Guardian Name(s): _____

Address: _____ City/State/Zip: _____

Phone: (H) _____ (C) _____ (W) _____

Email: _____

Medical Insurance Information: ID# _____ Group# _____

Emergency Contact and Phone Number: _____

****By signing this form below, you agree to allow your child's picture to be included on the Hanover Elementary Wrestling website and Hanover Elementary Wrestling marketing materials – official use only.**

_____ (Parent/Guardian Signature)

Thank you for your interest in our programs
 Andy Beckner 717-495-9272 Jon Beckner 717-479-3465
 thebeckners@embarqmail.com