



Towns of Livonia/Conesus Recreation Youth Wrestling



Dear Parent/Guardian(s),

This is an open invitation for all children in grades K-8 to participate in our winter youth wrestling program. **This program is organized around the concepts of skill building, social interaction and fun!!!**

- Dates:** November 14 - March 20th 2017
- Days/Times:** Mondays and Wednesdays from 5:30PM - 8 PM
- Age Levels:** Grades K-8
- Location:** Field House Wrestling Room, enter the cinder block building from the rear, on the back side of the Livonia stands (adjacent the football field) and proceed to the upstairs
- Cost:** \$30.00 per student (check payable to "Town of Livonia")
- Permission slips:** Returned by November 10th

Coach: Steve Palmeri, 346-5726

I give permission for my child; _____, to participate in youth wrestling. I understand that I am responsible for any injury that might occur during this program and will not hold the town of Livonia/Conesus or recreation staff liable for any injury during this program.

Parent Signature

Print Parent Name

Date

Check here if you are willing to volunteer to assist with: coaching supervision

Parent Email: _____ Home Phone: _____

Parent Cell #: _____ Emergency Contact/Phone: _____

Age of child registering: _____ Weight (please be as accurate as possible): _____

T-Shirt size (please circle): YS YM YL YXL AS AM

Deliver in person to Livonia Town Hall or Mail to: Town of Livonia Recreation, PO Box 43, Livonia NY 14487

This program is not a Livonia Central School District program. Procedures, supervision and insurance for children participating in this event are the responsibility of our organization and of the parents. The distribution of this flyer by LCS is for informational purposes and in no way should it be considered that the school district endorses our program and program philosophy. Finally, we recognize that the Livonia Central School District reserves the right to withhold distribution of these materials.