



APPLICATION & LIABILITY WAIVER

Check (X) box for Program Membership

- Pre-Season (Aug-Oct) \$200
- In-Season (Nov-Apr) \$365
- Off-Season (May-Oct) \$365
- Post-Season (May-Jul) \$200
- Annual \$680
- Monthly \$75

Call for family discount information.

Monthly Memberships - Due on 1st of each month

Monthly Memberships - After 15th day - prorated to \$40

Payment Option Questions:
michiganxtreme@gmail.com or 616-635-7559

MEMBERSHIP TOTAL \$
START DATE: _____ ENCLOSED: _____

GOLD

This highest level focuses on assisting those wrestlers who expect to win or place in the State Finals, NCAA's and/or Open Tournaments.

SILVER

Designed for serious wrestlers only who have several years of experience and who are preparing for a successful high school career and/or competing on a national level.

BRONZE

This program focuses on assisting wrestlers to improve beyond the basic skills and preparing them for the next level.

SCHEDULE

GOLD:	Sunday & Thursday	7:00pm-8:30pm
SILVER:	Monday & Wednesday	7:00pm-8:00pm
BRONZE:	Monday & Wednesday	5:45pm-7:00pm

**Practices which fall on major holidays will be cancelled.*

OPEN GYM Open Gym & Additional Practice Times - TBA

LOCATION 3494 Plainfield Avenue, NE - Grand Rapids, MI 49525

WEB SITE www.michiganxtreme.com

PAYMENT OPTIONS

All Applications/Liability Waivers must be sent to 5355 Northland Drive, NE Suite C, #134 Grand Rapids, MI 49525. Payments are accepted via check, money order or most major credit cards. Payment & Application are required in advance of participation. No refunds.

Mail application/payment:

Michigan Xtreme, LLC
5355 Northland Drive, NE
Suite C #134
Grand Rapids, MI 49525

WRESTLER'S NAME: _____ DOB: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

PARENT(S) NAME: _____

PRIMARY PHONE #: _____ ALT PHONE #: _____

SCHOOL/MYWAY CLUB: _____ GRADE: _____ WEIGHT: _____

EMAIL ADDRESS: _____

Michigan Xtreme, LLC, its owner, staff, guests, agents and its landlords do not assume liability for any injuries incurred while at or on the way to and from Michigan Xtreme, LLC. The students, in attending Michigan Xtreme, LLC and/or Michigan Xtreme, LLC Enterprises, LLC and in using the Michigan Xtreme, LLC facilities does so at his or her own risk. Michigan Xtreme, LLC, staff and its landlords shall not be liable for damages arising from personal injury sustained by the student during the classes or at the facilities. The student and/or parents assume full responsibility for any damages or injuries which may occur to the student during the classes and so hereby fully and forever exonerate and discharge Michigan Xtreme, LLC, its staff, its owners, staff, guests, agents and landlords from any and all claims, demands, damages, rights of action, or causes of action, present or future, whether the same be known, anticipated, or unanticipated, resulting from or arising out of the student's participation in the class session and in the use of the facilities. As a parent or legal guardian of the participant named above, I do hereby authorize Michigan Xtreme, LLC, its staff, its owners, staff, guests, agents and landlords, to seek any medical and/or surgical treatment which is reasonably thought to be necessary for the care of my child. I shall be fully responsible for honoring all costs necessary to provide medical treatment for my child. The undersigned hereby certifies that their child is physically able to participate at the camp or practice and that there are no impairments that would limit the participation in the programs. The undersigned hereby understands that wrestling is a sport, which involves intense physical contact between two individuals. The student will be involved in some intense training and competition including competitive wrestling. Injuries can and do occur during wrestling. The undersigned hereby grants permission for doctors and their designees to administer appropriate medical care, antigens, or injections, and to perform emergency procedures as necessary.

Parent or Legal Guardian's Printed Name

Parent or Legal Guardian's Signature

Date v070208