



*Fury Wrestling Club WILL DO ITS BEST TO PROVIDE A SAFE ENVIRONMENT AND TRAINING REGIMEN FOR OUR STUDENTS, HOWEVER, DESPITE THE BEST CIRCUMSTANCES, THERE IS A POSSIBILITY OF INJURY DURING CLASS OR TRAINING.*

AS A PARENT OR LEGAL GUARDIAN :

I CERTIFY THAT MY CHILD IS IN GOOD HEALTH AND CAPABLE OF PARTICIPATING IN ALL ACTIVITIES AND CLASSES. I HEREBY RELEASE AND FOREVER DISCHARGE FURY WRESTLING CLUB AND THE EDGE SPORTS CENTER LLC, ITS EMPLOYEES, OWNERS AND BOARD OF DIRECTORS OF AND FROM ANY ALL CLAIMS, DEMANDS, RIGHTS OR CAUSE OF ACTION OF WHATSOEVER KIND IN NATURE, ARISING FROM, OR BY REASON OF, ANY AND ALL KNOWN OR UNKNOWN BODILY OR PERSONAL INJURIES AND THE CONSEQUENCES THEREOF.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Insurance Information**

ALL PARTICIPANTS ARE REQUIRED TO BE COVERED WITH INSURANCE FOR ACCIDENTAL INJURY. IN THE MOST INSTANCES, FAMILY HEALTH INSURANCE IS ADEQUATE. PLEASE INDICATE YOUR FAMILY HEALTH INSURANCE PLAN BELOW.

Health Insurance Company Name: \_\_\_\_\_

Policy Authorization #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone #: (    ) \_\_\_\_\_

**Medical Treatment Authorization**

I/WE, BEING LEGAL GUARDIANS OF THE APPLICANT, AUTHORIZE THE FURY WRESTLING CLUB AND ITS AGENT PERMISSION TO REQUEST MEDICAL TREATMENT AS NECESSARY TO ENSURE THE WELL BEING OF OUR DEPENDENT.

Parent / Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_



**LOCATED AT**

**THE EDGE SPORTS CENTER  
12 KINGS CT  
FLEMINGTON NJ 08822**

[WWW.THEEDGESPORTSCENTER.NET](http://WWW.THEEDGESPORTSCENTER.NET)

908-432-0783



***WELCOME TO OUR CLUB!!***



<b>Internal Use Only</b> USA # _____ Date _____
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**REGISTRATION FORM**

**Training Center Location:**

*The Edge Sports Center*  
 12 Kings Ct  
 Flemington NJ 08822

CLUB STARTS APRIL 7, 2009!!  
 10% DISCOUNT IF RECEIVED PRIOR TO APRIL 1, 2009

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone #: (    ) \_\_\_\_\_

DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Weight: \_\_\_\_\_ (lbs) Height: \_\_\_\_\_ ft \_\_\_\_\_ ins

School / Coaches Name: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

**Membership Details**

ANNUAL        \$900      
 SEMI-ANNUAL    \$500      
 3-MONTH        \$250      
 1 MONTH        \$115  
 (TRIAL WORKOUT \$30)\*

**Private Lessons (Members Only)**

**Non-Members Welcome (additional charge)**

Individual:    \$ 60.00 1 – 1 hour lesson  
                   \$ 225.00 4 – 1 hour lessons  
 Group of 2:    \$ 130.00 1 – 1 hour lesson  
                   \$ 350.00 4 – 1 hour lessons  
 Group of 4:    \$ 150.00 1 – 1 hour lesson  
                   \$ 400.00 4 – 1 hour lessons

**USA WRESTLING CARD MANDATORY (\$35 additional charge)**

**PAYMENT DUE PRIOR TO WORKOUT**

CHECKS / CASH ACCEPTED - Make checks payable to The Edge Sports Center

\*ONE TRIAL WORKOUT PAYMENT WILL BE DEDUCTED FROM THE AVAILABLE MEMBERSHIPS IF YOU DECIDE TO BECOME A MEMBER OF The Fury Wrestling Club



**COACHES**

**KYLE BREWER**

4x District champion, 3x region place winner  
 Over 100 wins in high school  
 Wrestled for Drexel University  
 Wrestled and Graduated From Rutgers University  
 4 years of coaching experience

**MARK EBERSTEIN**

2x District champion, Region 5 champion, 2x finalist  
 Over 100 wins in high school  
 State finalist, 2x state place winner  
 Wrestled at and graduated from University of Maryland  
 2 years of coaching experience

**SCHEDULE OF CLASSES**

	High School	K-8	Style
Tuesday	8:00-9:30	6:30-8:00	Scholastic
Wednesday	8:00-9:30	6:30-8:00	Freestyle & Greco Roman
Thursday	8:00-9:30	6:30-8:00	Scholastic
Friday	6:00-7:30	6:00-7:30	Scholastic
Sunday	starting in fall		

