

Victory School of Wrestling – Membership Enrollment – 2007-08 Registration

Participant Information

Athlete's Name _____ Gender _____ Birthdate _____ Grade in fall '07 _____

Parent/Guardian Name(s) _____

Mailing Address _____

City/State/Zip _____

Home Phone Number _____ Mobile Phone Number(s) _____

USA Membership Card Number _____ (required, available for \$30)



Payment Information

This is a (check one): Full Payment Amount \$ _____

Installment Proposed Installment Plan _____

I agree to pay the proposed amount above by August 30, 2008 **X** _____

Membership Options

Gold Package

Pre-Season

Red Package

In-Season

Black Package

Post-Season

Conditioning Program

VTC Access (by appointment)

Private Sessions

Group Sessions

Wrestling Accomplishments
