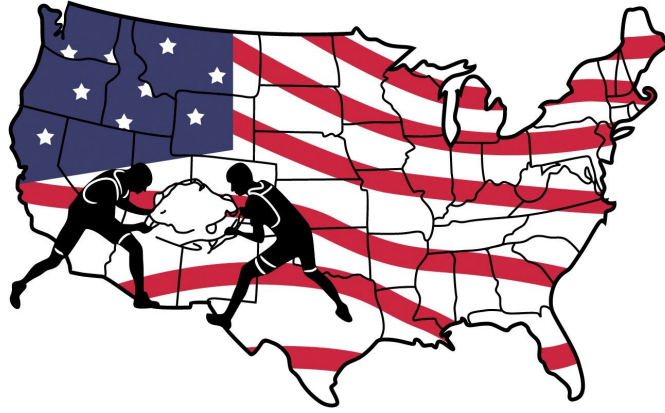


CORNERSTONE



WRESTLING

Wrestlers Name: _____

Parents Name: _____

I hereby release Cornerstone Wrestling Club, Pagosa Youth Wrestling, Pagosa Springs Middle School, Archuleta School District and all participating groups and persons connected with this club, from any and all liability for any injuries and damages whatsoever that may arise from my families participation and my wrestlers participation.

Parent Signature: _____

Date: _____

