

USA WRESTLING BIOGRAPHICAL INFORMATION

If you are competing in the CADET or JUNIOR division, please fill out this form.

Style _____

Weight Class _____

General Information

NAME: _____

HOME PHONE: _____

HOME ADDRESS: _____
STREET CITY STATE ZIP CODE

DATE OF BIRTH: _____
Mo/Day/Year

YEAR OF HS GRADUATION: _____

PARENTS NAMES (Father/Mother): _____

HIGH SCHOOL: _____ HS COACH'S NAME: _____

CLUB: _____ CLUB COACH'S NAME: _____

CLUB COACH'S PHONE _____ CLUB COACH'S EMAIL: _____

ATHLETES (Please fill in completely)

WRESTLING ACCOMPLISHMENTS: (Freestyle/Greco/Folkstyle accomplishments. Please include state titles, regional and national events with the appropriate years and individual placements.) If you are filling this form in online each line below must contain separate information.

HIGH SCHOOL VARSITY WRESTLING RECORDS:

9TH Grade: Wt. Class _____ Record _____ State Finish _____

10TH Grade: Wt. Class _____ Record _____ State Finish _____

11TH Grade: Wt. Class _____ Record _____ State Finish _____

12TH Grade: Wt. Class _____ Record _____ State Finish _____