



Pierce County Junior Wrestling League

Team Registration

Team: _____ Mascot/Symbol: _____

Team Colors: _____

Director Name: _____ Best Contact Name: _____

Best Contact Phone: _____ Best Contact Email: _____

Team Website: _____

Addtl Contact Name: _____

Phone: _____ Email: _____

Head Coach Name: _____ USAW Coach Card Number _____

Team Official Name _____

USAW Club (if chartered separately) _____

Additional Information that you would like added to your individual page on league website. _____

If changes occur during the season, please email them to pcjwmail@gmail.com

This registration form is to be submitted with your league fees, roster, vital statistics and coach card.

Information required on roster for each participant (per by-laws):

Name, address, phone, birth date, age as of 1/1, school, grade, beginning weight

PCJWL Website: www.pcjwl.weebly.com PCJWL email: pcjwmail@gmail.com

PCJWL Mailing Address: PO Box 5062 Spanaway WA 98387