

# 2015/2016 Wrestling Code of Conduct

1. ANY CIVIL LAW INFRACTION OR CONDUCT BY A PARTICIPANT IN THE LABC WRESTLING PROGRAM THAT IS DETERMINED BY THE HEAD COACH AND / OR EXECUTIVE MEMBER (S) OF THE LABC THAT IS DEEMED DETRIMENTAL TO THE PROGRAM, CLUB OR SCHOOL DISTRICT WILL RESULT IN A IMMEDIATE SUSPENSION /OR DISMISSAL BY THE HEAD COACH.
2. ANY CONDUCT REGARDED AS UNSPORTMANLIKE, ie; THROWING OF HEADGEAR, CURSING DURING A MATCH, NEGATIVE SOCIAL NETWORKING, ARGUING WITH A COACH, PARENT OR REFEREE, HORSEPLAY WHERE A INJURY HAS RESULTED WILL CARRY A MINIMUM 1 MATCH SUSPENSION.
3. ALL REGISTRATION FORMS, LIABILITY RELEASE FORMS AND PHYSICAL RELEASE FORMS ARE DUE BY FIRST PRACTICE.
4. ALL TEAM INFORMATION, SCHEDULING AND/OR CANCELLATIONS WILL BE LISTED ON THE CLUB WEBSITE AT [www.labcindians.org](http://www.labcindians.org) OR THE LEAGUE WEBSITE AT [www.vewl.org](http://www.vewl.org)
5. ALL WRESTLERS MUST ATTEND TWO FULL PRACTICES IN ORDER TO BE ELIDGIBLE FOR THE WEEK END MATCHES. THIS RULE IS UP TO THE DISCRETION OF THE HEAD COACH, IF HE REQUIRES MORE ATTENDANCE.
6. ANY WRESTLER WITH 3 UNEXCUSED ABCSCENCES WILL BE CUT FROM THE TEAM.
7. ANY WRESTLER INJURED DURING A LABC SANCTIONED PRACTICE / MATCH SHALL IMMEDIATELY NOTIFY THE HEAD COACH.
8. ALL INJURED WRESTLERS MUST SUPPLY A RELEASE FROM A DOCTOR OR HEALTH INSTITUION BEFORE RESUMING ALL WRESTLING ACTIVITIES.
9. ALL WRESTLERS MUST WRESTLE OFF FOR THEIR DESIRED WEIGHT CLASS TILL THE FOURTH MATCH OF THE SEASON. ANY WRESTLER WHO DOES NOT MAKE WEIGHT FOR THE DESIRED WEIGHT CLAS STHAT HE/SHE WRESTLED OFF AT WILL FORFEIT THE DAYS MATCH . IT WILL BE THE HEAD COACH'S DISCRETION AS TO IF THE WRESTLER WILL THEN STAY AT THAT WEIGHT CLASS. ANYONE WHO WISHES TO WRESTLE AT ANY PARTICULAR WEIGHT CLASS MUST BE WITHIN 2 LBS. +/- OF THAT WEIGHT AT THE TIME OF WRESTLE OFFS. IT IS ALSO OF THE UNDERSTANDING THAT THE WEIGHT A WRESTLER WRESTLES OFF FOR IS THE WEIGHT HE/SHE NEEDS TO MAINTAIN FOR A MATCH/MEET.
10. NO UNIFORM MAY BE HANDED OUT UNTIL ALL REGISTRATION, FUNDRAISER MONIES HAVE BEEN SATISFIED.
11. ALL PRACTICE GEAR SHOULD BE AIRED OUT NIGHTLY AFTER PRACTICE TO REDUCE THE PROBABILITY OF VIRUSES THAT OCCUR WITHIN THE SPORT.
12. ALL PARENTS MUST SIGN FOR ALL EQUIPMENT WHEN BEING HANDED OUT AND RETURNED. RETURN DATE FOR YOUR WRESTLER WILL BE AT THE VERY END OF THEIR SEASON, ANY CLUB ISSUED EQUIPMENT WILL BE COLLECTED AT THAT TIME. THEY ARE FULLY RESPONSIBLE FOR CLEANING AND CARE OF ALL UNIFORMS AND WARM-UPS IF HANDED OUT TO THE WRESTLER. IF ANY PART OF THE WRESTLING UNIFORM EI: (SINGLET, WARM UPS OR BAG) IS DAMAGED OR LOST THE PARENT WILL BE RESPONSIBLE FOR ALL REPLACEMENT COSTS OF SUCH EQUIPMENT. CURRENT REPLACEMENT COST-\$225

13. **NO PARENT WILL BE ALLOWED IN THE WRESTLING AREAS DURING PRACTICE. ALL PRACTICES WILL BE CLOSED SESSIONS.** NO PARENT WILL BE ALLOWED IN THE HALLWAYS OR LOCKER ROOM FACILITIES OF THE LEHIGHTON AREA MIDDLE SCHOOL.
14. NO WRESTLER MAY PRACTICE OUTSIDE THE ORGANIZATION UNLESS THE HAVE THE CONSENT OF THE HEAD COACH ON ANY SET NIGHTS PRACTICE. ANYONE CAUGHT PRACTICING OUTSIDE THE TEAM ON A PRACTICE NIGHT WILL BE REMOVED FROM THE SQUAD.
15. HEAD COACH HAS THE SOLE AUTHORITY ON ALL ROSTER MOVES. THERE WILL BE SITUATIONS WHERE ROSTER MOVEMENT IS NECESSARY FOR COMPETIVENESS.
16. ALL PARENTS ARE REQUIRED TO DONATE TIME IN THE REFRESHMENT STAND, TABLE HELP OR SCORERS TABLE. HELP IS CRITICAL AS THE SUCCESS OF THE PROGRAM DEPENDS ON ITS VOLUNTEERS .
17. NO PARENTS ARE ALLOWED ON THE MAT OR LOCKER ROOM DURING ANY MATCH. ONLY LABC APPROVED COACHES WHO WILL HAVE THE PROPER CLEARANCES WILL BE ALLOWED.
18. HEAD COACH WILL BE AVAILABLE FOR ALL DISCUSSIONS PERTAINING TO ANY WRESTLING TOPIC BEFORE OR AFTER PRACTICES OR ON MATCH DAYS.
19. ANY COACH DISMISSED FROM A MEET SHALL BE SUSPENDED FROM THE FOLLOWING WEEKS MEET AS WELL.
20. HEAD COACH IS RESPONSIBLE FOR HIS OWN CONDUCT AND THE ASSISSTANTS CONDUCT AS WELL.
21. ANY NOVICE ENTRANT WHICH FAILS TO ENTER THE VEWL NOVICE TOURNAMENT AFTER CONFIRMATION OF PARTICIPATION, WILL BE RESPONSIBLE FOR REIMBURSING THE LABC THE STATED REGISTRATION FEE.

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I have read and fully understand, acknowledge and agree to the rules and terms set forth in the detachable portion of this form.

PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_