

**DO NOT FAX!!**

**2024-2025**

**Wrestling Weight Control Program**

**(RETAIN ORIGINAL - FORWARD ELECTRONIC COPY TO IHSAA (before December 27, 2024)**

PARENTAL PERMISSION FORM TO

WRESTLE BELOW MINIMUM ESTABLISHED STANDARDS

I/we authorize that \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Student’s Name - Printed]

of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[Full School Name]

Alpha Weight\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Body Fat %\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**may** wrestle below the standards set by the Indiana High School Athletic Association of 7% body fat for males and 12% body fat for females. I agree that a maximum of *2% of the 7% (12% for females)* may be taken off the minimum measurement. I also understand the associated risks of granting such permission.

SIGNED (Parent/Guardian) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

SIGNED (Athletic Director/Athletic Trainer) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**(THIS FORM IS SOLELY FOR WRESTLERS WHOSE INITIAL BODY FAT ASSESSMENT EXCEEDED 7% (Boys)/12% (Girls))**

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