

18th Annual
Fred Harding Classic Tournament
6 Man Round Robin



Date: Saturday, March 1st, 2008 @ 9:00a.m.

Location: Addison High School, 1 Colwell St, Addison, NY 14801

Entry Fee: \$15.00, make checks payable to

T.A.W.C. Entry fee must accompany registrations, and must be postmarked by **February 27^h, 2008**. No walk ins. Mail **ALL** entries to: Susanna Stacy
7885 Andrews Rd, Addison, NY 14801

Weigh-ins: Honor system. Tournament directors reserve the right to eliminate or combine weight classes, age groups, or make decisions that deem appropriate. Tournament directors reserve the right to challenge weight and age. Birth certificates may be requested. **Divisions:** All ages as of day of tournament, 3/1/08.
6 and Under, 7-8, 9-10, 11-12, 13-15

JV/VAR. EXPERIENCE WELCOME

6 man bracket as much as possible, w/ weight allowance within 5 lbs or 10%. Wrestlers may compete in only 1 weight group and 1 age division.

Bout length: 1-1-1 for 12 and under, 2-1-1 for 13-15. Overtime of 1 minute, then 30 second ride rule.

Determination of final ruling, #1-most wins, #2-head to head, #3-total number of pins.

Awards: Individual trophies 1st, 2nd, 3rd

Medals 4th, 5th, & 6th.

Team trophies, 1st-4th (Ten wrestlers per team) 1st-10 pts, 2nd-8 pts, 3rd-6 pts, 4th-4 pts.

Team Sportsmanship award.

Refreshments: Kitchen will be open all day.

*****NO FOOD OR DRINK IN GYM*****

Officials: New York State Certified

Questions: Brandon Windows, (607) 359-3542, Susanna Stacy, (607) 359-4871, Todd Duvall, (607) 359-3123

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Name: _____ Birthdate: _____

Age: _____ Weight: _____

Address: _____

Phone#: _____ School/Club: _____

Grade: _____ Yrs Exp. _____ 2006-2007 Record: _____

In consideration of your acceptance of my entry, I hereby release the Tuscarora Addison Wrestling Club, Addison Central Schools, Steuben County School Districts, and officials of this tournament from any claims, liabilities of right for damage for any injuries or losses suffered by me directly or indirectly in training, for, traveling to and from and/or participating in the TAWC Tournament and my child is covered by a health/injury insurance policy.

Signature of Parent/Guardian: _____

Date: _____