28th Annual Brockport Youth Wrestling Tournament This is an AAU Tournament (Must have a current AAU card)

<u>DATE:</u> Saturday, March 22nd, 2008 <u>PLACE:</u> Brockport Oliver Middle School

COST: \$15.00 per wrestler

FORMAT: 5 man round robin, scoring to be determined, high school rules

ELIGIBILITY:

- 1. Wrestlers must have permission in writing;
- 2. Wrestlers must meet age as of March 22nd, 2008
- 3. No 9th graders regardless of age. No Varsity or J.V. wrestlers.

AWARDS: Trophies for 1st, 2nd and 3rd place; Medals for 4th and 5th place

WEIGH-INS: Thursday night (03/20/08) - 7:00 p.m. to 8:00 p.m. and Saturday morning (03/22/08) - 7:00 a.m. to 8:30 a.m. All weigh-ins are in the Oliver Middle School Gym. No weigh-ins allowed after 8:30 a.m. on Saturday. Wrestlers will weigh-in only once. (They can't weigh-in and then try to loose weight to get into a lower weight.) Please take note we have changed Friday weigh-in to Thursday night because of Good Friday

Wrestling will start at approximately 9:30 A.M.

WEIGHT CLASSES AND AGE DIVISIONS: (5 & 6), Pre- Midgets (7 & 8), Midgets (9 & 10), Intermediates (11 & 12), Juniors (13 & 14)

5 man round robin brackets will be used. Contestants will be placed into groups with no more than five wrestlers in a group. Tournament officials reserve the right to change or combine weight classes. Weight groups will be divided if the smallest wrestler in a group is more than 5 (five) pounds or 10% (ten percent) lighter (whichever is greater) than the heaviest wrestler.

Any questions or concerns please call either:

Dave Schickler - 585-637-3862

Pete Unterborn – 585-964-5002 or punterbo@rochester.rr.com

PREREGISTER BY MARCH 20TH, 2008 BY SENDING COMPLETED FORM AND ENTRY FEE TO: OR BRING TO WEIGH-INS

Dave Schickler 13 Woodstock Lane Brockport, New York 14420

- 1. Space is limited to the first 300 wrestlers. Walk-ins will be allowed but only up to the 300 wrestler limit.
- 2. All wrestlers MUST weigh in at the times stated above. NO honor weigh-ins.
- 3. AAU cards maybe purchased at the door but are preferred before hand

Entry blank must be completed and signed before a wrestler will be allowed to compete.

PLEASE PRINT

Wrestler's Name: ______ School District: _______

Address: ______ Phone: ______

Age: _____ Date of Birth: mm/dd/yy __/_/ Coach: ______

I hereby release the Brockport Wrestling Club from any and all claims regarding injury or illness that may be caused in conjunction with this event.

Parent's Name (Printed) Parent's Signature

MAKE CHECKS PAYABLE TO "BROCKPORT WRESTLING CLUB"