9th ANNUAL HILTON YOUTH WRESTLING TOURNAMENT

DATE:	Sunday, March 1, 2009. Qualifier for Gene Mills Eastern National Tournament.
	Central High School, 400 East Avenue, Hilton, NY 14468
ENTRY FEE:	\$15.00 per wrestler. Make checks payable to "HILTON YOUTH WRESTLING, INC."
PRE-REGISTRATION:	All wrestlers must pre-register before noon on Friday, February 27 , 2009. To pre-register, a wrestler must submit his/her name , weight (in wrestling gear and shoes) and age (as of 03/01/09):
	(1) by mail (Hilton Youth Wrestling, Inc.; PO Box 84, Hilton, New York, 14468); or (2) by
	telephone message (Dawn Brock 585-392-3906).
A.A.U.	This event is sanctioned by the Amateur Athletic Union of the U.S., Inc. All wrestlers must
	have a current A.A.U. membership. This A.A.U. membership is not included as part of the
	entry fee to this event. A.A.U. membership must be obtained before the competition begins.
	To obtain an A.A.U. membership, visit the A.A.U. web site www.aausports.org.
WEIGH-INS:	7:30 - 9:00 a.m. All wrestlers will be weighed in wrestling gear and shoes. Brackets will be
	prepared using the weight submitted during the pre-registration process. If a wrestler weighs more
	than two pounds over the pre-registration weight, the wrestler may be disqualified from the
	tournament. No walk-ins.
WGT. DIVISIONS:	5 lbs. or 10% of body weight, whichever is greater. Tournament officials may combine or change
AGE DIVISIONS:	weight classes to maximize wrestling. (5 - 6) (7 - 8) (9 - 10) (11 - 12) (13 - 14) No varsity experience. Proof of age may be
AGE DIVISIONS:	required if challenged.
FORMAT:	8 man brackets, double elimination, NYS high school rules, 3 one-minute periods for ages 5-12, 3
	one-and-one-half-minute periods and full mats for ages 13-14, (one minute overtime if needed -
	sudden victory - first point wins). Wrestling will begin at 9:30 a.m.
	During the tournament, only coaches will be permitted at mat-side.
AWARDS:	Trophies for top four places, medals for all non-placers.
ADMISSION:	Over age 12 - \$1.00. Families - \$3.00. Age 12 & under - free.
FOOD:	Available in the cafeteria. No food or drink in the gym. No smoking on school premises! .
	ENTRY FORM (Please TYPE or PRINT clearly)
Wrestler's Name: _	
Age on 3/01/2009:	/ Date of Birth:/ Phone #:
, .go on o, o n = 0001	
AAU Number (requ	ired): Weight (w/ wrestling gear):
School District:	Club (if any): Grade:
Street Address:	
City / Town / Village	e: State: Zip: onsideration of your acceptance of this entry form for the 9th Annual Hilton Youth Wrestling
	In March 1, 2009, I hereby, for my child and myself, release Hilton Youth Wrestling, Inc., the Hilton urnament officials, personnel, agents and volunteers from any and all claims, liabilities, or rights to
	, loss, illness or death that may be suffered or caused in conjunction with this event. I understand
	be physically fit to participate in this tournament. I will be responsible in full for the welfare of my
child and myself. I also	state that my child is currently covered by health insurance.
Print:	Sign:
(Name of Parent or	Sign: Sign: (Date Signed)