

# Spartan Wrestling Club

Wrestling Tournament  
Sponsored by NHSCA



**Schedule of events** Style – Scholastic / Folkstyle

**Location:** Greece Olympia High School

1139 Maiden Lane, Rochester New York, 14615

**Date** – Sunday March 22, 2009

**Registration and weigh-ins** – Sunday, March 22, 2009 7:00 to 8:30 AM

**Registration cost-** \$20 (multiple entries from one family \$15 per entry)

**Wrestling begins** – March 22<sup>nd</sup> 10:00 AM

**Divisions and weight classes** (may change based on entries)

**High School Division (grades 9-12)** 96, 103, 112, 119, 125, 130, 135, 140, 145, 152, 160, 171, 189, 215, 285

**Middle School Division (grades 7-9)** 80, 85, 90, 95, 100, 105, 115, 125, 135, 145, 155, 170, 190, 220, 260

\*9<sup>th</sup> graders with varsity experience or with good JV records should wrestle in the high school division.

\*Wrestlers may only participate in “1” division.

**Uniforms** - Singlets are NOT required, but certainly recommended (headgear optional).

**High School Division** - 1-2-2, all matches

**Middle School Division** – 1-1-1, all matches

**Awards** - Medals will be awarded to the top 4 place finishers in each weight class & division.

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## Entry Form

You may mail in registration or walk in and register

Name \_\_\_\_\_ weight class \_\_\_\_\_ grade \_\_\_\_\_

Division:  high school (gr. 9-12)  middle school (gr. 7-9)

Email address \_\_\_\_\_ phone ( ) \_\_\_\_\_

School \_\_\_\_\_ coach \_\_\_\_\_

Season record \_\_\_\_\_ career record \_\_\_\_\_ highest wrestling honors \_\_\_\_\_

**A \$20 (or \$15 if more than one family member wrestling) event / insurance fee should be mailed with this entry form to secure your spot in the Tournament**

I have enclosed a check for \$\_\_\_\_\_ which includes \$20(\$15) for the event / insurance fee. **Please make check payable to the “Spartan Wrestling Club”**

**LIABILITY RELEASE** I, the undersigned, individually and as a parent/guardian \_\_\_\_\_ a minor, ask that he/she be admitted to participate in the above NHSCA sponsored event. I do hereby agree to release, discharge and hold harmless the Spartan Wrestling Club, Greece Central School District, NHSCA, their agents and employees of and from all causes, liabilities, and damages, claims, or demands whatsoever on account of any injury or accident involving the said minor arising out of the minor's attendance at the sporting event or in the course of competition held in connection with this event. I also give permission for my child's photograph to appear in promotional material regarding this event.

PARENT/GUARDIAN SIGNATURE REQUIRED: \_\_\_\_\_

**Please mail to: Tony Russo, 1139 Maiden Lane, Rochester, NY 14615, Phone: 585-966-5000**

**Contact: Coach Tony Russo; 585-315-5970 or rct5151@yahoo.com**