

CLV Youth Wrestling Novice Tournament

SUNDAY, January 26th 2014

Headgear is Mandatory

DATE: Sunday, January 26, 2014

SITE: Cattaraugus Central School 25 North Franklin Street Cattaraugus, NY 14719

ELIGIBILITY: 1ST & 2ND year wrestlers only (12 yrs. Old & under as of January 13th 2014)

ENTRY FEE: \$15.00 per wrestler /20.00 per wrestler at the door

TEAM DISCOUNT: 10 or more wrestlers \$12.00 per wrestler PRE-REGISTRATION ONLY BY JAN. 13th 2014

Registrations must be sent together for Team Discount / NO PHONE REGISTRATIONS

NO REFUNDS

ONLY 3 COACHES ADMITTED FREE

ADMISSION: \$3.00 Adults – Students \$1.00 - Under 5 - Free

WEIGH-INS: 7:30 a.m. 9a.m

AWARDS: Awards will be given to each wrestler.

WRESTLING WILL BEGIN AT 10:00 a.m. SHARP

Cafeteria will open at 8 a.m. with breakfast & lunch

EXPLANATION OF TOURNAMENT

This is a beginning-wrestling tournament to provide match experience to new wrestlers. Every effort is made to pair the wrestlers to each other's AGE, WEIGHT & EXPERIENCE. Each wrestler will receive a bout sheet that he/she will carry for the day. All wrestlers will wrestle 3 individual matches. If within the first two matches a wrestler gets pinned within 30 seconds, the official will restart the match in the neutral position, (allowing more mat time) and the wrestler who pinned his/her opponent will be awarded the win. When the wrestler has completed his/her 3 matches they will be given their award. We wish for you a safe trip and a very enjoyable visit with us at CLV! Skin Checks are mandatory!!!! Nurses have final say!!! Doctor's note must be presented for exception!

Make checks payable to: CLV Youth Wrestling (\$35.00 return check fee)

Mail registrations to: Noreen Koningisor 8038 Mosher Hollow Rd Cattaraugus, NY 14719

For more information contact Noreen at 71-512-2208

NAME _____ TEAM _____

ADDRESS: _____ / _____ / _____ STREET CITY ST
ZIP

PHONE :(_____) _____ E-MAIL _____

In consideration of your acceptance of my entry, I intend to be DATE OF BIRTH: ____/____/____ legally bound hereby for myself, my heirs, and assigns and waive any and all claims to damages, which I have against the

CLV Youth Wrestling (parents), AGE: _____ WEIGHT: _____

Parent/Guardian Signature

WRESTLING EXPERIENCE- PLEASE CIRCLE

1st or 2nd year

