



Pioneer Youth Wrestling
USA 4 Man Round Robin January 18, 2015

This is a sanctioned USA Wrestling Tournament. Wrestlers must have a current USA Wrestling card. No cards can be purchased at the time of the tournament. Register for a card at www.themat.com/membership

Location: Pioneer High School 12125 Countyline Rd Yorkshire, NY 14173

Entry Fee: \$20.00 Registration Fee (Make checks payable to: Pioneer Youth Wrestling)

Registration: Send Registration and checks to: Pioneer Youth Wrestling 2269 Sullivan Rd Arcade, NY 14009 post marked by Tuesday, January 13,2014

Questions: Contact: Yvonne Russell (716) 353-5503 or pioneeryouthwrestling@gmail.com
 All questions answered within 24 hours.

Time: Skin Checks 7:00- 8:00 AM, Honor Weight ins. \$20 weight challenge fee all challenges need to be made by the end of the 1st round. \$20 will be returned if correct. Coaches meeting 8:45 Wrestling Starts at 9 AM

Rules: NYS High School Rules Modified, Maddison Weight Class (less than 15% weight variance within the same weight class)

Divisions: All ages as of day of the tournament. Periods: Divisions I, II, III (1-1-1) Division IV, V (1:30-1:30-1:30)
I. 6&Under II. 7 & 8 III. 9 & 10 IV. 11 & 12 V. 13& 14

Awards: Awards for 1st, 2nd and 3rd Team Trophies for 1st, 2nd,and 3rd (Ten wrestlers per team)

Food: Kitchen will be open throughout the day.
**** NO FOOD OR DRINK WILL BE ALLOWED IN THE GYM!****

Admission: \$2/person, 4 years and under Free

50 dollar return check fee

*** * NO SMOKING ALLOWED ON SCHOOL GROUNDS * * ***

Name:_____ Birthdate:_____ Age:_____

Address: _____

School / Club:_____ Phone:_____ Division:_____

Years Wrestled: _____ Exact Weight:_____ USA Number _____

2013/2014 record_____

Experience: (not years wrestled). Circle which applies:
 (1=Beginner and 5=Very experienced/wins most matches) 1 2 3 4 5

In consideration of your acceptance of my entry, I hereby release the Pioneer Youth Wrestling, Yorkshire Pioneer School District and its employees, interim administrators, authorized volunteer and committee members, student teachers, auxiliary instructors and members of the Board of Education, 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 Pioneer Youth Wrestling Tournament. I have my own insurance.

 Signature of Wrestler

 Date

 Signature of Parent

 Date