

# Wildcat Wrestling Tournament

Marcus Whitman High School  
Baldwin Rd. Rushville  
Saturday March 26, 2011

## \*\*\*\*Pre-registration\*\*\*\*

Entry Fee: \$17.00/ Adult admission: \$3.00/Students free/Two coaches per team free

Doors open at 7:00 am

Split Session:

5/6, 7/8, 9/10 weight verification by 8:30

11/12, 13/14 weight verification by 12:00

No JV or Varsity experience. 8 man brackets where possible/double elimination. Ages as of 3-13-10. High School rules, 3 one minute periods with one minute "sudden death" Overtime tiebreaker. Certified referees. 3 pound allowance from registered weight allowed. Random seeding.

Trophies for 1st-4th, Participation trophies/medals for all wrestlers.

Food available all day in cafeteria. No food/drink outside cafeteria.

Mail, fax, email or phone registrations by March **Wednesday March 23rd** (NO LATE REGISTRATIONS ACCEPTED, checks payable to Wildcat Wrestling Club)

Kevin and Chris Smith  
5172 Bassage Road  
Stanley, NY 14561  
585-739-4994 (Kevin)  
585-554-5109 (fax)  
[cabs15@frontiernet.net](mailto:cabs15@frontiernet.net)

Club/School: \_\_\_\_\_

Wrestler's Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_ Weight \_\_\_\_\_

Phone Number: \_\_\_\_\_

### Liability Waiver:

I agree to let my child participate in the Wildcat Wrestling Tournament. I understand and agree that the Wildcat Wrestling Club, Marcus Whitman Central School District, and all those associated in it's operation shall in no way be held liable for any injury received during the tournament, or in going to and from the tournament. Wrestling is a sport which involves extensive physical exercise I understand it is my responsibility, through the consultation of our family physician, to insure that my child is fit to participate in this program. I do, hereby assume all risk and hazards, incidental to the conduct of the above named program. I further release, absolve, indemnify and hold blameless the above named principals or any of the personnel appointed by them. I have my own insurance to cover any injuries my child may sustain.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Wrestler Signature

\_\_\_\_\_  
Date