

1st ANNUAL THOROBRED WRESTLING CLUB OF CNY



6 MAN RR YOUTH WRESTLING TOURNAMENT

GENE MILLS EASTERN NATIONAL QUALIFIER

LOCATION: Windsor Central High School – 1191 NY Route 79, Windsor, NY 13865

WHEN: Saturday, January 5th, 2013.

CHECK-IN: Saturday @ 7:00-8:00am - Opening Ceremony @ 8:45 - Wrestling will start @ 9:00 am

REGISTRATION: \$ 20.00 PRE-REGISTRATION ONLY. Fill out and mail payment Postmarked by Friday Dec 29, 2012. Teams/Clubs who Pre-Register by E-Mail do so by January 3rd before 9pm. Keep in mind first 350 entries will be accepted. Wrestler's are allowed to enter 2 age divisions. Please fill out 2 separate Entry Forms and mail with 2 payments. No Walk-Ins & No Refunds.

LIMITED TO THE FIRST 350 PAID ENTRIES!!!

ADMISSION: Adults \$3.00 – Kids \$2.00

AWARDS: 1st – Large Trophy & Champion T-shirt - 2nd- 4th Place Trophies - 5th - 6th Place Medals

TEAM AWARDS: Custom Plaques for Top 3 Teams (1st = 10pts, 2nd = 7pts, 3rd = 4pts, 4th = 2pts)

SEEDING MEETING: Seeding based on Exp. level/records. Level/ Record must be filled out or they will be grouped with Exp. kids

MATCHES: 6 MAN ROUND ROBIN 3-1 minute periods. Sudden Death OT - 1 min on feet - Two 30 second ride-out

RULES: NYS Certified Refs – 6 Man round robin - Madison Style Pairing. Please be honest about weight as we will be randomly checking wrestlers as they check-in. It is \$20 per weight Challenge. Wrestler must NOT weigh over 2.5lbs of registered weight. If you win challenge you will get your money back & wrestler is disqualified.

DIVISIONS: 6&U, 7&8, 9&10, 11&12, 13&14 (Modified Wrestlers are welcome) NO JV/Varsity Exp!!!!

VENDOR: Wrestling Gear & Wrestling Supplies!!!

MEALS: Food Served all day **RAFFLES:** 50/50

Top 4 Qualify For: Gene Mills Eastern Nationals in Phoenix, NY –March 30, 2013 – Register @ www.cnypin2win.com

Make Checks/Money Orders Payable to and Mail to:

Thorobred Wrestling Club OF CNY, c/o Jason Butler

556 East Windsor Rd, Windsor, NY 13865

For further information contact: Jason Butler- Home # (607) 655-4351 or Cell # (607)427-9026 – jbutler81@tds.net

MAIL FORM BELOW ONLY

INDIVIDUAL WRESTLER ENTRY FORM – Fill Out Entire Form Please!!!

NAME: _____ DOB: _____ AGE: _____

WEIGHT: _____ DIV: _____ RECORD: _____ YRS WRESTLED: 0 1 2 3 4 5 6

ADDRESS: _____

SCHOOL/CLUB: _____ PHONE: _____

E-MAIL: _____ GRADE-IN-SCHOOL _____

In consideration of this entry being accepted, I hereby, for my child, waive and release any and all rights and claims for damages I may have against the Village of Windsor, the Thorobred Wrestling Club of CNY, it's agents, representatives, successors, the Windsor Central School District and assigns for any and all injuries suffered by my child at said tournament. I also will take responsibility for any and all damages done by my child at said tournament. I also understand that my child must be covered by a health/injury insurance policy as a requirement for participating in this tournament and my child is covered by a health/injury insurance policy.

PARENT'S SIGNATURE: _____ **DATE:** _____