7th ANNUAL HILTON YOUTH WRESTLING TOURNAMENT

DATE:	Sunday, Jan. 14, 2007. Qualifier for Gene Mills Eastern National Tournament.
PLACE: Hilton C	Central High School, 400 East Avenue, Hilton, NY 14468
ENTRY FEE:	\$15.00 per wrestler. Make checks payable to "HILTON YOUTH WRESTLING, INC."
PRE-REGISTRATION:	All wrestlers must pre-register before noon on Friday , January 12 , 2007. To pre-register, a wrestler must submit his/her name , weight (in wrestling gear and shoes) and age (as of 01/14/07) as follows: (1) by mail (Hilton Youth Wrestling, Inc.; PO Box 84, Hilton, New York, 14468); or (2) by fax (585-392-2246); or (3) by telephone message (Dawn Brock 585-392-3906). All wrestlers must have an A.A.U. card (available for purchase at the door) and must submit an entry form
WEIGH INC.	(see below) signed by a parent or legal guardian.
WEIGH-INS:	7:30 - 9:00 a.m. All wrestlers will be weighed in wrestling gear and shoes. Brackets will be prepared using the weight submitted during the pre-registration process. If a wrestler weighs more than two pounds over the pre-registration weight, the wrestler may be disqualified from the tournament. Absolutely no walk-ins.
WGT. DIVISIONS:	5 lbs. or 10% of body weight , whichever is greater. Tournament officials may combine or change weight classes to maximize wrestling.
AGE DIVISIONS:	(5 - 6) (7 - 8) (9 - 10) (11 - 12) (13 - 14) No varsity experience. Proof of age may be required if challenged.
FORMAT:	8 man brackets, double elimination, NYS high school rules, 3 one-minute periods for ages 5-12, 3 one-and-one-half-minute periods and full mats for ages 13-14, (one minute overtime if needed sudden victory - first point wins). Wrestling will begin at 9:30 a.m. During the tournament, only coaches will be permitted at mat-side.
AWARDS:	Trophies for top four places, medals for all non-placers. T-shirts for all champions.
ADMISSION:	4 coaches per team - free. Over age 12 - \$1.00. Families - \$3.00. Age 12 & under - free.
FOOD:	Available in the cafeteria. No food or drink in the gym. No smoking on school premises! .
Wrestler's Name:	ENTRY FORM (Please TYPE or PRINT clearly)
	Date of Birth: / / 19 Phone #:
AAU Number (required): Weight (w/ wrestling gear):	
School District:	Club (if any): Grade:
Street Address:	
City / Town / Village	e: State: Zip:
Tournament to be held o School District and all to damages for any injury the need for my child to	onsideration of your acceptance of this entry form for the 7th Annual Hilton Youth Wrestling in January 14, 2007, I hereby, for my child and myself, release Hilton Youth Wrestling, Inc., the Hilton burnament officials, personnel, agents and volunteers from any and all claims, liabilities, or rights to r, loss, illness or death that may be suffered or caused in conjunction with this event. I understand be physically fit to participate in this tournament. I will be responsible in full for the welfare of my state that my child is currently covered by health insurance.
Print:	Sign: Under Sign Sign: (Name of Parent or Legal Guardian) (Date Signed)
(Name of Parent or	Legal Guardian) (Name of Parent or Legal Guardian) (Date Signed)