



## Finger Lakes Youth Wrestling League Inc.

Presents:

# The Finger Lakes Regionals

**Date:** Sunday March 4th

**Location:** Gananda Middle School, Day Spring Drive, Walworth, NY

(We should be ok with parking, however, if you could car pool that would be great.)

**Weigh Ins & Registration:** This is a split session tournament

5/6, 7/8, 9/10

7:30 - 8:30 A.M.: Ages 5/6, 7/8, 9/10, Registration table closes at 8:30 sharp!! Wrestling begins at 9:30. Limit to 1<sup>st</sup> 200 wrestlers in this age group.

11/12, 13/14

7:30 - 11:00 AM Ages 11/12, 13/14, Registration table closes at 11:00 AM sharp!! Wrestling begins approx 1:00PM. Limit to 1st 200 wrestlers in this age group.

- Walk in registration at weighins only. No J.V. or Varsity experience

- **Certified officials**

- **Round Robin Tournament** (we will do our best to make 4 man brackets)

**Entry Fee:** \$16.00 registration, one entry per wrestler, per session

**(Make checks payable to: Finger Lakes Youth Wrestling League Inc.)**

**Eligibility:** Age determined as of day of tournament. Wrestlers must have proof of age if challenged

**Food:** Concessions will be available. Tournament t-shirts for sale

**Rules:** Three one minute periods. **Section Five High School Rules**

**Awards:** 1<sup>st</sup> - 4<sup>th</sup>

**Information:** Dave Smith 315-548-2947

John Fiorino 585-943-7890

I understand that wrestling is a sport, which involves risk. 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 Finger Lakes Youth Wrestling Inc., Gananda Central School District, and their agents and representatives. Furthermore, I take responsibility for any and all injuries suffered by my child at said tournament. I understand that my child must be covered by a health/injury insurance policy and by signatures below, verify that he or she is covered. I agree that Parent/Coach is responsible for any damages caused by this wrestler. Poor sportsmanship/inappropriate behavior will not be tolerated and person (s) will be asked to leave the grounds.

**Parents Signature:** \_\_\_\_\_ **Wrestlers Signature:** \_\_\_\_\_

**Wrestlers printed name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Wt:** \_\_\_\_\_

**YRS. experience:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Phone** \_\_\_\_\_ **TEAM/School:** \_\_\_\_\_