

CANANDAIGUA
Youth Folkstyle Wrestling Tournament
Saturday, March 1, 2008
Canandaigua Academy High School
435 East Street, Canandaigua NY 14424

**Open to all
Wrestlers
14 & under**

**No JV or
Varsity
Experience**

ENTRY FEE: \$20.00 All Spectators & Coaches Free

Certified Officials

Age Groups based on Year Born; (Proof of age must be presented if contested)

7:30-8:30 a.m. Check-in/Weigh-ins for Beginners, Bantams, & Midgets

Beginners - (6 & under)

Bantams - (7 & 8)

Midgets - (9 & 10)

Format - 8-man brackets, full wrestle backs

Awards - Top 8 place finishers

10:30-11:30 a.m. Check-in/Weigh-ins for Novice & Schoolboy

Novice - (11 & 12)

Schoolboy - (13 & 14)

Format - 8-man brackets, full wrestle backs.

Awards - Top 8 place finishers

Pre-registrations by e-mail deadline: 2/28/08

Pre-registrations by mail deadline: 2/27/08

For Novice & Schoolboy send to e-mail: ameyer2@rochester.rr.com

For Beginner, Bantam, and Midget send to e-mail: tamara63@frontiernet.net

Mail-in to: Rich Romeo, 215 Granger St., Canandaigua, NY 14424

(Checks payable to CASB-Wrestling)

RULES: Tournament officials reserve the right to alter or combine weight classes where better competition will result.

UNIFORMS: All wrestlers must wear an approved wrestling singlet or gym shorts and T-shirt. Sneakers or wrestling shoes required. **NO LOCKER SPACE AVAILABLE. NOT RESPONSIBLE FOR LOST OR STOLEN ITEMS.**

FOOD: Great hot food and subs will be available from the Canandaigua Wrestling Booster Club.

ENTRY FORM

Name _____ **Age as of 1/01/08** _____
Address _____ **Phone Number** _____
School/Team _____ **Approximate Weight** _____
Years Experience _____

I hereby release from any and all claims regarding any injury, illness or death that may be caused in conjunction with this tournament including the Canandaigua Wrestling Booster Club, Canandaigua City School District and all personnel and agents associated with this event. I will be responsible in full for the welfare of the named child. I also state that my child currently is covered by health insurance. I will be responsible for any property damages caused by my child.

Wrestlers Signature

Parent or Guardian Signature

Age _____ Division _____ Weight _____ Paid _____