

5TH Annual Bolivar-Richburg Jr. Wrestling Club Youth Wrestling Tournament
5-MAN ROUND ROBIN
March 13 2010

Registration:

PRE-REGISTRATION REQUIRED BY SAT. MARCH 6TH

PAYMENT REQUIRED WITH REGISTRATION FORM. FIRST 300 WRESTLERS. NO WALK-INS.

****Ohio Tournament of Champions Qualifier****

****Gene Mills Qualifier****

Place:

Bolivar Richburg High School- 100 School Street Bolivar, New York
Doors open 7:00 a.m. wrestlers must arrive by 8:00 to check-in & remain on bracket

Entry Fee:

\$15.00 per wrestler must be received by Saturday, March 6th. NO REFUNDS
Make checks payable to Bolivar-Richburg Youth Wrestling Club \$20 charge on returned checks
Wrestler may enter more than one age or weight group with registration fee for each entry.
There will be no rest period granted if wrestler enters more than one bracket.

Mail to: Stacy Bell 81 Olean St. Bolivar NY, 14715

Weigh-ins:

7:00 - 8:30 With Coaches and Seeding Meeting Immediately Following (8:45)
All wrestlers must weight in and have a mandatory skin check.

Wrestling will begin ASAP at the conclusion of the coaches meeting.
Ages 4 to 16 as of March 13, 2010. Proof of age needed if challenged.

Singlets or gym shorts, no long pants.

Divisions:

6 & under...(Max 85)

7-8...(Max110)

9-10...(Max130)

11-12...(Max160)

13-14...(Max200)

15-16...(Max250)

Weight groups will be within 5 lbs or 10%

Format:

Three 1 minute periods

NY State High School rules. Referees decisions are final.

Admission:

\$3.00 Adults, \$1.00 Students Two coaches per team admitted free.

Awards:

1st through 4th place in each bracket.

Refreshments:

Available all day. Food will be served in the cafeteria. No food in the Gym.

Any questions contact : Al Davis @ 585-928-1378

Stacy Bell @ 585-928-1285 sbell2627@yahoo.com

Entry Form--(Please Print Clearly)

Name	Age	Division	Weight
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Team Name	Date of Birth	Phone#
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I hereby, for my child and myself release the Bolivar Richburg Wrestling Club, the Bolivar Richburg Central School, the Allegany County School District and all officials of this tournament from any claims, liabilities, or the rights to damages for any injuries or losses suffered by my child or myself directly or indirectly in the training for, traveling to and from, and participation in the Bolivar Richburg Wrestling Tournament. **I HAVE MY OWN INSURANCE.**

SIGNATURE OF LEGAL GUARDIAN _____ DATE _____