

WEBSTER YOUTH WRESTLING TOURNAMENT

Sunday, January 30, 2011
Webster Thomas Field House
800 Five Mile Line Road

- WEIGH IN:** **Honor Weigh In** - Tournament officials have the right to challenge weights. All challenges must be before first round.
- REGISTRATION:** **Pre-Registration only!** Entries must be in by **Tuesday, January 25th**
No entries accepted after, please mail early. **NO WALK- INS!**
- CHECK IN:** 8:00 – 9:00 AM Wrestling starts at 9:30 (last year over 300 wrestlers had 4 or more matches and we were done by 4:00)
- ENTRY FEE:** \$20 (**pre-reg. only!**) - payable to Webster Wrestling.
Spectators \$1.00 –children 12 and under FREE
- DIVISIONS:** 5/6, 7/8, 9/10, 11/12, 13/14 --- **NO** JV EXPERIENCE
Age as of 1/30/11 (proof of age may be required)
- FORMAT:**
- 4-6 man round robin which guarantees 3 matches
 - Bout Lengths: 5/6, 7/8, 9/10 1min, 1min, 1min
11/12, 13/14 1 ½ min, 1 ½ min, 1 ½ min
 - NYS Rules apply- with first takedown wins in overtime
 - Weight divisions will be separated by 5 lbs. or 10% of wrestler's weight (Tourn. Dir. reserves the right to combine wt. classes for better wrestling)
 - Singlet, headgear, and wrestling shoes are preferred (No loose clothing, zippers, pockets, or snaps)
 - Tournament will run on 7 mats with 2 full mats and others divided into ½'s and ¼'s for younger groups - including a beginner's mat for kids to exp. more mat time. **No pin and done!** - If beginner wrestler gets pinned, they will have the option to wrestle out the period or match. Please indicate **true exp.** to help modify this format.
- AWARDS:** Top 4 place finishers
- REFRESHMENTS:** Food and snacks available all day – NO food or drink allowed in the gym

MAIL REGISTRATION TO: VINCE ASITO 746 Somerset Dr., Webster, NY 14580
FURTHER INFORMATION: VINCE ASITO @ vasito@rochester.rr.com, or 585-703-6323
JOHN VANDERMARK @ jvandermark@rochester.rr.com

Name _____ Birthdate _____ Age _____ Weight _____

Address _____ City _____ ZIP _____

Phone _____ Email _____

School/Club _____ Grade _____ Division _____ Years Experience _____

In consideration of your acceptance of my entry, I hereby release the Webster Wrestling Club, Webster Central Schools, and tournament officials of this tournament from any claims, liabilities or right for damage for any injury or losses suffered by me directly or indirectly in training for, traveling to and from and/or participating in the Webster Youth Wrestling Tournament. I have my own insurance and understand that my child must be covered by a health insurance policy as a requirement for participating in this wrestling tournament. I take responsibility for any damages done by my child at this tournament. No locker space available. Not responsible for lost or stolen items!

Parent's Signature _____ Date _____

Wrestler's Signature _____ Insurance Info/Policy# _____