

N.W.A.A. YOUTH WRESTLING TOURNAMENT

Sunday, February 17th, 2013

****OHIO TOURNAMENT OF CHAMPIONS and GENE MILLS QUALIFIER****

- This event is sanctioned by New York Wrestling Association for Youth (NYWAY).
- All participants must have a current NYWAY membership.
- NYWAY membership is not included as part of the entry fee to the event.
- NYWAY membership must be obtained before the competition begins. Visit www.nyway.org to obtain membership.

**THIS IS A PRE-REGISTRATION TOURNAMENT AND REGISTRATION MUST BE POSTMARKED
BY FEBRUARY 12th NO EXCEPTIONS!!!**

PLACE: Niagara Wheatfield High School
2292 Saunders Settlement Rd
Sanborn, NY 14132

WEIGH-INS: Sunday, February 17th, 2013: 7:00 am - 8:30 am *Wrestling will begin at about 9:30am*
ENTRY FEE: \$20.00: Make checks payable to "N.W.A.A. YOUTH WRESTLING"
MAIL ENTRIES: JASON LEBER
4320 ISHERWOOD DR
NIAGARA FALLS, NY 14305
Registrations must be postmarked no later than FEBRUARY 12th 2013

DIVISIONS: *Based on Year of Birth*

FEATHER ('07 & after): 30, 35, 40, 45, 50, 55, 60, 70

BANTAM ('05-'06): 40, 45, 50, 55, 60, 65, 72, 80, 90, 100, 110

MIDGET ('03-'04): 48, 52, 56, 60, 64, 68, 72, 76, 80, 92, 100, 115, 130

JUNIOR ('01-'02): 56, 60, 64, 68, 72, 76, 80, 85, 90, 95, 100, 110, 125, 140, 160, 180, 200

SCHOOLBOY ('99-'00): 68, 72, 76, 80, 84, 88, 92, 96, 100, 105, 110, 115, 120, 126, 133, 140, 150, 160, 175, 205, 240

CADET ('97-'98): 85, 92, 100, 105, 110, 115, 120, 125, 130, 135, 140, 145, 152, 160, 171, 200, 242

******* WE RESERVE THE RIGHT TO COMBINE WEIGHT CLASSES*******

RULES: N.Y.S. (Modified High School)

Double Elimination- 8 wrestler brackets when possible. Some Round Robin if needed.

Bout length: 3- 1 minute periods for F, B, M, J, 3- 1 ½ minute periods for SB and C

AWARDS: Trophies for 1st, 2nd and 3rd places! Medals for 4th place.

Team Trophies for 1st, 2nd and 3rd place

ADMISSION: We are asking each spectator to bring one canned good or non-perishable food item. All donations will be given to the Food Bank of Niagara County.

FOOD: Breakfast, Lunch, Snacks & Drinks will be available all day

CONTACT: Jason Leber: Email- lebes1981@gmail.com Cell: (716) 525-2903

NAME: _____

CLUB: _____

ADDRESS: _____

NYWAY#: _____

CITY: _____ **STATE:** _____ **ZIP:** _____

DOB: _____ **AGE:** _____

PHONE: _____

DIVISION: _____

In consideration of your acceptance of my entry, I hereby release the NIAGARA WHEATFIELD AMATEUR ATHLETIC ORGANIZATION, BOOSTER CLUB, NIAGARA WHEATFIELD SCHOOL DISTRICT, and THE TOURNAMENT OFFICIALS from any and all claims, liabilities, and/or losses by me directly or indirectly in training for, traveling for, traveling to or from, and/or participating in the NIAGARA WHEATFIELD AMATEUR ATHLETIC ORGANIZATION WRESTLING TOURNAMENT. I have insurance coverage for the wrestler.

WRESTLER SIGNATURE: _____ **DATE:** _____

PARENT / LEGAL GUARDIAN: _____ **DATE:** _____