

**HOLLEY WRESTLING CLUB
BOYS AND GIRLS TOURNAMENTS**

(* Separate divisions for boys and girls)

Qualifier for the Gene Mills Eastern Nationals in Oswego, NY

DATE: Saturday, April 1st, 2006
PLACE: Location: **Holley Elementary School, 3800 North Main Street, Holley, NY 14470**
AGE: Day of tournament. Proof may be required.
RULES: NYS High School rules. Double Elimination Sudden victory overtime.

WEIGH-INS: Friday, March 31st 6:30 – 7:00pm Any age division
Saturday, April 1st 7:30 - 8:30am Boys: 5-12 years old and **All Girls Division**
11:30 – 12:00pm Boys 13 years old and high school

GROUPED WEIGHTS IN EACH AGE DIVISION

*5 & 6 years Bouts: 1 1/2 - 1 1/2	*11 & 12 years Bouts: 2 - 2
*7 & 8 years Bouts: 1 1/2 - 1 1/2	*13 & 14 years (& under 9 th grade) Bouts: 2 - 2
*9 & 10 years Bouts: 1 1/2 - 1 1/2	*Grades 9 – 12 (Selective Classification Bouts: 2 - 2 may wrestle in HS Division)

GIRLS: ANY AGE: 1 1/2 - 1 1/2

****NOTE:** Girls will **not** be allowed to wrestle in the boys' tournament.

**TOURNAMENT OFFICIALS RESERVE THE RIGHT TO ALTER OR COMBINE WEIGHT CLASSES
WHEN BETTER COMPETITION WILL RESULT.**

WRESTLING BEGINS: As soon as possible after the group completes weigh ins.

***THERE WILL BE A SKIN CHECK FOR RASHES. IF IN DOUBT, BRING A NOTE FROM YOUR DOCTOR.**

OFFICIALS: Certified NYS officials at each mat, if possible.
AWARDS: Trophies for 1st and 2nd, Medals for 3rd and ribbons for 4th
FOOD: Concession stand open all day. No food or drink in the locker room or gym.
ENTRY FEE: \$15.00 at the door. **No pre registration**
(Once you pay and enter the tournament, you will not be allowed your money back.)
ADMISSION: \$3.00 Family or \$1.00 Adults & \$.50 Students

WAIVER OF LIABILITY

In consideration of this entry being accepted, I hereby, for my child and myself, waive and release all rights and claims for damages I may have against the Village of Holley Recreation Department, the Holley Wrestling Club, Holley Central School District, coaches, officials, its agent representative, successors, or anyone affiliated with this tournament for any accidents, injuries, or misfortunes that may occur during the said tournament suffered by my child or myself. I also have my own insurance.

WRESTLER'S NAME _____ **PHONE #** _____

WRESTLER'S SIGNATURE _____ **HONORS** _____

PARENT SIGNATURE _____ **GRADE** _____

CLUB OR SCHOOL _____ **YEARS EXPERIENCE** _____

DATE OF BIRTH _____ **AGE** _____ **DIVISION** _____

(OFFICIAL USE ONLY) *****

WEIGHT CLASS AT WEIGH-INS _____

AGE DIVISION _____

HOLLEY WRESTLING CLUB
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