WAYNE PRE-SEASON TAKEDOWN TOURNAMENT

SUNDAY, NOVEMBER 6th, 2005

WAYNE HIGH SCHOOL 6200 ONTARIO CENTER RD. (RT. 350 - 1/4 mile S of RT. 104) ONTARIO CENTER, NY 14520

Eligibility: This tournament is open to wrestlers in $7^{th} - 12^{th}$ grades.

<u>Divisions</u>: Junior High $-7^{th}/8^{th}/9^{th}$ grade & High School $-10^{th}/11^{th}/12^{th}$ grade. 9^{th} graders can choose to wrestle in either division (not both).

<u>Format</u>: This will be a "Takedown Tournament". Wrestlers will be re-started on their feet after each takedown. The matches will be two 2:00 minute periods. Note: Time of period is subject to change based upon the number of matches a wrestler has participated in.

Awards: "Champion" T-shirt for 1st and medals for 2nd and 3rd.

Entry Fee: \$15.00 day of the tournament. Each wrestler will receive at least two matches.

<u>Pre-Registration</u>: \$12.00 Checks to be made out to "Wayne Wrestling" (\$25.00 returned check fee) - Mail by October 28th to: Wayne Wrestling, P. O. Box 283, Ontario, NY 14519 or at weigh-ins on Saturday, November 5th 4:00pm - 6:00pm.

<u>Weigh-ins / Registration</u>: 11/6/05, 8:00am – 10:00am; We will use 8 man "Tough Guy" brackets where possible. Weight classes may be determined by the Madison System.

<u>More Information</u>: See the Wayne Wrestling web site at http://www.wayne.k12.ny.us/wrestling You may also contact the Tournament Director Mike Rosselli at (585) 750-3975 or Wayne Coach Scott Freischlag at sfreischlag@wayne.k12.ny.us or (315) 524-1060.

ENTRY FORM

NAME: _______SCHOOL: _______GRADE: _______ ADDRESS: _______PHONE: ________ CITY: _____STATE: ____ZIP: _____Email: _________ I do hereby; assume all risks and hazards incidental to the participation in and conduct of this tournament. I further release, absolve, indemnify, and hold blameless the Wayne Wrestling Booster Club, Wayne Central Schools, and all personnel associated with its operation. I (parent or guardian print name) _______ will be responsible in full for the welfare of the above named child.

Tournament official use only

Parent or Guardian Signature:

Date: _____

PAID:	Cash	or Check #	DIVISION:	HS or JR	WEIGHT:	
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