



Salamanca Youth Wrestling

1st Annual Salamanca Winter Warm-Up Tournament

Saturday, January 6th 2007

Limited to the first 400 entries -- Team trophies (1st – 5th)

- Date:** Saturday, January 6, 2007
Time: Weigh-ins: Saturday, January 6th, 2006 7:00 – 8:30 AM Wrestling starts @ 9:00 AM
Site: Salamanca Central High School, 50 Iroquois Drive, Salamanca, NY 14779
Rules: Modified NYSHS rules Double Elimination (Sudden Death Overtime 30 second ride-out)
Bout Length: 10 & under 1-1-1 11 & 12 2-1-1
Entry Fee: \$15.00
Awards: 1st thru 4th will be awarded trophies and champions will get championship shirt

This is a pre-registration *ONLY* tournament. All registrations must be post marked by December 30th 2006. No Exceptions!!! No Weight Allowance!!!

NO PHONE ENTRIES ACCEPTED!!!

Questions: jason@salamancayouthwrestling.org or heather@salamancayouthwrestling.org

*******Gene Mills Qualifier*******

Make checks payable to Salamanca Youth Wrestling Inc

- Age:** Age as of 6th January, 2007
Divisions: 6&U-----40, 45, 50, 55, 60, HWT (Max 85)
7&8-----45, 50, 55, 60, 65, 70, 80, 90, HWT (Max 120)
9&10----55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 110, HWT (Max 130)
11&12--60, 65, 70, 75, 80, 85, 90, 95, 100, 110, 120, 130, HWT (Max 160)

Hot foods, including breakfast will be available starting @ 7:00 AM
Admission: Adults--\$3.00, Students--FREE

Entry Form--(Please Print Clearly or Type)

Name: _____
Age: _____ Division: _____ Weight: _____
Address: _____ City: _____ Zip Code: _____
Phone Number: _____ School / Club: _____

In consideration of your acceptance of my entry, the undersigned: 1. We agree that prior to participating, each will inspect the facilities and equipment being used, and if they believe anything to be unsafe, they will immediately advise their coach or supervision of such condition(s) and refuse to participate. 2. Acknowledge and fully understand that each participant will be engaging in activities that involve risk of serious injury, including permanent disability, death, severe social and economic losses which might result not only from their actions, inaction's or negligence, but the actions, inactions or negligence of others, the rules of play, or the condition of the premises or of any equipment used. Further, that there may be other risks not known to us or not reasonably foreseeable at this time. 3. Assume all the forgoing risks and accept personal responsibility for damages following such injury, permanent disability or death or financial loss. 4. In full comprehension and complete understanding of the foregoing warning of the risk of injury, death and/or financial loss, I and my legal heirs do hereby discharge, waive and release and covenant not to sue for any and all claims for damages I/We may have against the Salamanca Youth Wrestling Inc., Salamanca School District and/or all tournament officials, sponsors or administrators for any and all injuries suffered by me in connection with said tournament. I grant permission for Salamanca Youth Wrestling Inc., to post my son(s)/daughter(s) name, age, weight on their website (www.salamancayouthwrestling.org).

Parent's signature

Contestant's signature

Send entries to: Salamanca Youth Wrestling, 607 East State St., Salamanca, NY 14779

**www.salamancayouthwrestling.org
We only use NYS certified referees!!!**