

Mat Power Youth Wrestling Club

15 th Annual Youth Wrestling Tournament

Sunday February 5, 2011 at North Rose-Wolcott High School

11631 Salter Colvin Rd Wolcott NY 14590

Head coach Matt Manley 1-585-794-9899

Entry Fee: 20.00 per wrestler

Weigh- In: Please use pre registration form attached. Note: Doors open **7:30** am

Weigh- In's at the door to verify registered weight within 3 lbs

Special Note: Construction is finished, please use doors at far end of parking lot near pool

Age as of 01/01/2012 (Div 1- 5 & 6) (Div 2 - 7 & 8) (Div 3 - 9 & 10)

(Div 4 – 11 & 12) (Div 5 – 13 & 14)

No Wrestlers with JV or Varsity experience !

Trophies awarded 1st, 2nd & 3rd Place, Medals for all other wrestlers

Weight classes: We will group within approximately 5 lbs or 10 % (whichever is greater)

Double elimination for groups of 8 wrestlers per bracket

Team Awards for 1st, 2nd, 3rd, Coach Must submit roster of 10 with Pre registration.

All Officials will be certified

Admission: Spectators Adults 2.00 ,Children 1.00, under 5 free

Food: Available in cafeteria. **Absolutely no cooler's, drinks or food allowed in Gym.** Coolers allowed in cafeteria only.

No Smoking allowed on school grounds

See attached Pre- Registration form

Pre registrations appreciated by Wed Feb 1st and to be confirmed by 4 pm friday Feb 3rd

Send to: **Mat Power Wrestling** c/o Vicki LaValley 6208 North Huron Rd Wolcott, NY, 14590

Or Email to (Lavalleymarine@aol.com) or Fax to 315-594-1597 please print or type. Phone 315-594-8364

Registrations may be limited to 350 wrestlers

The club coach must arrive with a copy of pre registration form to verify roster by **8 am**

And to re verify each of their own wrestlers information such as age, weight & report any problems or discrepancies by 9 am.

Wrestlers must arrive by 8:30 am. And must verify wall charts before wrestling can begin. Report any errors to their own coach.

Wrestling Tournament to start at 9:30 AM !!!!

Mat Power Wrestling Club

14th Annual Wrestling Tournament

Sunday Feb, 5 2011

Pre Registration form Deadline Fri 2/3/2011 4 pm

Please Print or Type & verify spellings

Club Name _____

Head Coach _____ **Coach Phone number** _____

Contact Name (If not coach) _____ **Contact Phone** _____

Fax _____ **Email** _____ **Other** _____

Wrestlers

First & Last Name	Weight	Age as of 01/01/2012	* Team of ten player
1 _____			
2 _____			
3 _____			
4 _____			
5 _____			
6 _____			
7 _____			
8 _____			
9 _____			
10 _____			
11 _____			
12 _____			
13 _____			
14 _____			

Total payment due upon arrival Checks payable to Mat Power Wrestling

Number of entries _____ x 20.00= _____ Total Due

In consideration of your acceptance of the entries listed above. I /we hereby release North Rose Wolcott /Mat Power youth wrestling & the North Rose Wolcott Central School, The Villages of North Rose & Wolcott and the Tournament officials from any Claims, Liabilities ,or rights to damage for any injuries or losses suffered by me directly or indirectly in traveling to or from or while participating in this event

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