



# Warwick Valley Holiday Wrestling Tournament

**NOVICE AND OPEN DIVISIONS \* SUNDAY, DECEMBER 16, 2012**

**WARWICK VALLEY HIGH SCHOOL 89 SANFORDVILLE ROAD, WARWICK, NY 10918**

**Entry Fee:** \$25 if **received** by 12/05/12. All others \$30. **No walk-ins**. Register online at [www.warwickyouthwrestling.com](http://www.warwickyouthwrestling.com) or by mail. Registration will close 12/12/12 at midnight or once the entry limit is reached. Tournament has closed early last 2 years; **register early!**

**Limit:** 300 wrestlers; novice criteria will be strictly enforced for novice division, 1st & 2nd year wrestlers only.

**Weigh Ins:** Honor weigh-ins; weight may be verified by tournament director. Wrestlers must be within 3 pounds of registered weight. No refunds if disqualified. Updated weights can be emailed to [sferreir@optonline.net](mailto:sferreir@optonline.net) before December 13th at 8pm.

**Divisions:** Division 1: 5 & 6 year olds; Division 2: 7 & 8 year olds; Division 3: 9 & 10 year olds; Division 4: 11 & 12 year olds; Division 5: 13 & 14 year olds. Age is as of date of tournament and may be challenged prior to first match; birth certificate must be available if questioned. No High School experience of any kind.

**Check In:** **Divisions 1, 2 & 3:** 7:15 am check in; wrestling will start at 8:30 am sharp.  
**Divisions 4 & 5:** 12:30 pm check in; wrestling will begin at 1:30 pm.

**No USA or AAU Card Required!**

**Format:** 5 and 6 Man Round Robins wherever possible; Madison Weight System. Matches will be 1-1-1. Wrestling on 6 mat surfaces.

**Awards:** Individual trophies for 1st through 3rd place; medals for the balance. Team Trophies for 1st through 3rd place teams (1st- 10 pts, 2nd - 7 pts, 3rd - 4 pts). Each team can designate a maximum of 10 wrestlers. Team rosters need to be submitted by 8:30 am December 16<sup>th</sup> to be eligible.

**Team Trophies**

**Food:** Cafeteria will be open for breakfast & lunch; no food or drink in the gym.

**Admission:** \$5 for adults, wrestlers and children free.

**Contact:** For more information contact Steve Ferreira at [sferreir@optonline.net](mailto:sferreir@optonline.net) or by phone at: 845-469-6005. See also [www.warwickyouthwrestling.com](http://www.warwickyouthwrestling.com) for additional info and driving directions. To register by mail, please complete the following and return along with check payable to Warwick Valley Youth Wrestling to Steven Ferreira, 98 Hambletonian Road, Chester, NY.

## -----Registration Form-----

**Name Of Wrestler:** \_\_\_\_\_ **Phone Number** \_\_\_\_\_

**Division** \_\_\_\_\_ **Weight** \_\_\_\_\_ **Date Of Birth** \_\_\_\_\_ **Wrestling Season** **1st 2nd 3+**  
(circle one)

**Team** \_\_\_\_\_ **Email Address** \_\_\_\_\_

I agree to allow the above named wrestler to participate in the Warwick Valley Youth Wrestling Holiday Tournament and assume full responsibility for any injuries while participating and or traveling to or from this event. I will not hold liable Warwick Valley Youth Wrestling, its representatives, coaches, referees, or the Warwick Valley School District for injuries or losses sustained while participating in, or traveling to or from, this tournament.

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_