

# 1<sup>st</sup> ANNUAL THOROBBRED WRESTLING CLUB OF CNY



## 6 MAN RR YOUTH WRESTLING TOURNAMENT GENE MILLS EASTERN NATIONAL QUALIFIER

**LOCATION:** Windsor Central High School – 1191 NY Route 79, Windsor, NY 13865

**WHEN:** Saturday, January 5th, 2013.

**CHECK-IN:** Saturday @ 7:00-800am - Opening Ceremony @ 8:45 - Wrestling will start @ 9:00 am

**REGISTRATION:** \$ 20.00 **PRE-REGISTRATION ONLY. Fill out and mail payment Postmarked by Friday Dec 28, 2012. Keep in mind first 350 entries will be accepted.** Wrestler's are allowed to enter 2 age divisions. Please fill out 2 separate Entry Forms and mail with 2 payments. No Walk-Ins & No Refunds.

**LIMITED TO THE FIRST 350 PAID ENTRIES!!!**

**ADMISSION:** Adults \$3.00 – Kids \$2.00

**AWARDS:** 1<sup>st</sup> – Large Trophy & Champion T-shirt - 2<sup>nd</sup>. 4<sup>th</sup> Place Trophies - 5<sup>th</sup> - 6<sup>th</sup> Place Medals

**TEAM AWARDS:** Custom Plaques for Top 3 Teams (1<sup>st</sup> = 10pts, 2<sup>nd</sup> = 7pts, 3<sup>rd</sup> = 4pts, 4<sup>th</sup> = 2pts)

**SEEDING MEETING:** Seeding based on Exp. level/records. Level/ Record must be filled out or they will be grouped with Exp. kids

**MATCHES:** 6 MAN ROUND ROBIN 3-1 minute periods. Sudden Death OT - 1 min on feet - Two 30 second ride-out

**RULES:** NYS Certified Refs – 6 Man round robin - Madison Style Pairing. Please be honest about weight as we will be randomly checking wrestlers as they check-in. It is \$20 per weight Challenge. Wrestler must NOT weigh over 2.5lbs of registered weight. If you win challenge you will get your money back & wrestler is disqualified.

**DIVISIONS:** 6&U, 7&8, 9&10, 11&12, 13&14 (Modified Wrestlers are welcome) **NO JV/Varsity Exp!!!!**

**VENDOR:** Wrestling Gear & Wrestling Supplies!!!

**MEALS:** Food Served all day **RAFFLES:** 50/50

**Top 4 Qualify For:** Gene Mills Eastern Nationals in Phoenix, NY –March 30, 2013 – Register @ [www.cnyin2win.com](http://www.cnyin2win.com)

**Make Checks/Money Orders Payable to and Mail to:**

Thorobred Wrestling Club OF CNY, c/o Jason Butler

556 East Windsor Rd, Windsor, NY 13865

**For further information contact:** Jason Butler- Home # (607) 655-4351 or Cell # (607)427-9026 – [jbutler81@tds.net](mailto:jbutler81@tds.net)

### -----MAIL FORM BELOW

**ONLY**-----

**INDIVIDUAL WRESTLER ENTRY FORM - Fill Out Entire Form Please!!!**

NAME: \_\_\_\_\_ DOB: \_\_\_\_\_ AGE: \_\_\_\_\_

WEIGHT.: \_\_\_\_\_ DIV: \_\_\_\_\_ RECORD: \_\_\_\_\_ YRS WRESTLED: 0 1 2 3 4 5 6

ADDRESS: \_\_\_\_\_

SCHOOL/CLUB: \_\_\_\_\_ PHONE: \_\_\_\_\_

E-MAIL: \_\_\_\_\_ GRADE-IN-SCHOOL \_\_\_\_\_

**In consideration of this entry being accepted, I hereby, for my child, waive and release any and all rights and claims for damages I may have against the Village of Windsor , the Thorobred Wrestling Club of CNY, it's agents, representatives, successors, the Windsor Central School District and assigns for any and all injuries suffered by my child at said tournament. I also will take responsibility for any and all damages done by my child at said tournament. I also understand that my child must be covered by a health/injury insurance policy as a requirement for participating in this tournament and my child is covered by a health/injury insurance policy.**

**PARENT'S SIGNATURE:** \_\_\_\_\_

DATE \_\_\_\_\_