

Inferno Wrestling Club

Round Robin Tournament

Date: Sunday, February 26th, 2017
First 300 Entries

Format: 5 or 6 man round robin when possible

Location: Murray Athletic Center – Elmira College, 170 Huck Finn Road, Horseheads, NY 14845

Entry Fee: \$25.00 Registration Fee (Make checks payable to: Inferno Wrestling Club)
Money is due at Pre-Registration. No Walk-ins. Send Registration and checks to:
Colby Audinwood, 37 Philo Road W, Elmira, NY 14903 – Must be postmarked by February 20th, 2017.

Time: Wrestling Starts at 9 AM sharp, Check In: 7:30- 8:00 AM

Weigh Ins: Honor weigh ins

Rules: NYS High School Rules Modified Bout Length (1 min.-1 min. -1 min.)

Divisions: I. 6&Under II. 7 & 8 III. 9 & 10 IV. 11 & 12

Coaches must verify weight and experience. If weight is challenged, wrestler must be within 2 pounds of weight listed on registration form, or be disqualified from tournament. Weight must be challenged before 2nd round. Tournament Director reserves the right to combine weight classes. Wrestlers may wrestle in more than one division, but will be required to register for both divisions.
NYS Certified Referees. No JV or Varsity experience.

Awards: Awards for 1st, 2nd, 3rd, 4th
Team Trophies for 1st, 2nd and 3rd (Ten wrestlers per team)

Food: Food will be available throughout the day.

Admission: Adults: \$3.00 Students: \$2.00 Senior Citizens: Free

Questions: Contact: Colby Audinwood @ 607-426-5848
Email Team Roster to: INFERNOYOUTHWRESTLING@YAHOO.COM
50 dollar return check fee

Name: _____ **Birthdate:** _____ **Age:** _____ **Exact Weight:** _____

School / Club: _____ **Phone:** _____ **Division:** _____

Experience: (not years wrestled). Circle which applies:
(1=Beginner and 5=Very experienced/wins most matches) 1 2 3 4 5

In consideration of your acceptance of my entry, I hereby release the Inferno Wrestling Club, Elmira College - Murray Athletics Center, and the officials of this tournament from any responsibility or liability for any injury, accidental or otherwise.

Signature of Wrestler: _____

Signature of Parent/Guardian: _____ Date: _____