

CARTHAGE WRESTLING YOUTH TOURNAMENT
SUNDAY, JANUARY 19 2025 @
CARTHAGE HIGH SCHOOL

Times: Split Start

- Div. 1/2/5
Check-In: 7-8 am
Wrestling starts at 9 am
- Div. 3/4
Check-In: 11-12 pm
Wrestling starts at 1 pm (may start sooner depending on first session)

Divisions: (age as of January 16, 2025) (**No JV/Varsity experience**)

- D1 (5/6 year olds)
- D2 (7/8 year olds)
- D3 (9/10 year olds)
- D4 (11/12 year olds)
- D5 (13/14 year olds)

Format:

- Honor Weigh-Ins, Madison Weight System (10%), Round Robin Format
- Bouts are 1/1/1 for all divisions w/ HS coaches/wrestlers officiating
- NYS HS rules with 1st OT :30 SV and 2nd OT :30 Rideout
- Tournament director reserves the right to combine/eliminate weight groups when necessary

Awards: Medals for 1st - 3rd place with Champion T-Shirts

Entry Fee: Non-Refundable \$30 (Cash or checks - made out to: CWA) – Email for Venmo
Pre-Registration Only; Limited to first 300 wrestlers; No Walk-Ins

****Registration needed by Thursday 1/16/25, please follow directions on the entry form on how to register. You can email the registration form and pay at the door****

Admission: \$2 for adults (concession stand will be available)

For more information, please contact Don Dorchester at 315-222-5061 or ddorchester@carthagecsd.org

PLEASE COMPLETE THE REGISTRATION FORM AND SEND BACK WITH PAYMENT

2025 CARTHAGE WRESTLING YOUTH TOURNAMENT REGISTRATION FORM

****ALL REGISTRATIONS MUST BE RECEIVED BY THURSDAY JANUARY 16, 2025****

Check made out to: CWA

Send registration and money/check to: Don Dorchester
3906 Deer River Rd.
Carthage, NY 13619

Name: _____ Date of Birth: __/__/__ Age: _____

Weight: _____ (must be within 2 lbs.) School/Club: _____

Experience Level: Beginner Experienced Advanced

Address: _____

Parent Name: _____ Phone Number: _____

Circle the Division you would like to wrestle:

D1 D2 D3 D4 D5

Warning Waiver and Release of Liability and Agreement to Participate

The Carthage – CWA, Carthage Central School District, its coaches and/or affiliates are not responsible for any injuries or illness incurred during the participation of the Carthage Wrestling Youth Tournament. Wrestling is a physical contact sport involving a degree of risk; parent acknowledge and accept that risk by allowing their child to participate. I understand that there is an inherent risk associated with these activities and I permit my child to participate in these activities without restriction. I agree to hold CWA and Carthage Central School District harmless for any accidents-medical or dental – or any other expenses incurred as a result of my child’s participation with this tournament.

 Print Neatly – Parent/Guardian Name

 Signature – Parent/Guardian

 Date