

ST. PATRICKS DAY WRESTLING FESTIVAL
SATURDAY MARCH 17TH, 2018
K – 8th GRADE

Walt Whitman High School North Gym
301 West Hills Rd, Huntington Station 11764

REGISTRATION AND WEIGH IN:

HONOR WEIGH-IN BY CLUB COACH OR MIDDLE SCHOOL COACH

E-MAIL ENTRIES, GRADE, COACHES RATING (1-5) & WEIGHTS TO: DIGGER11@OPTONLINE.NET
BY MONDAY MARCH 13TH

LIMITED TO 300 WRESTLERS

BRING ALL FEES AND PERMISSION SLIPS TO TOURNAMENT ON SATURDAY. NO WALK-INS.

WEIGHT CLASSES:

MADISON WEIGHT SYSTEM / ROUND ROBIN FOR GRADES K-8

DIVISIONS: K, 1-2, 3-4, 5-6, 7-8

Tournament Director reserves the right to modify weight classes

ENTRY FEE:

\$30.00 CHECKS PAYABLE TO: **WILDCAT WRESTLING CLUB**

ALL WRESTLERS MUST HAVE A USA WRESTLING CARD.

Adult Spectators: \$5.00/Adult, \$1.00/Kids

WRESTLING:

K – 2nd GRADE CHECK IN:

8:00AM – WRESTLING STARTS @ 8:30 AM

3rd - 4th GRADE CHECK IN:

9:00 AM - WRESTLING STARTS @ 9:30 AM

5TH – 6TH GRADE CHECK IN:

11:00 AM - WRESTLING STARTS @ 11:30PM

7TH – 8TH GRADE CHECK IN:

12:30 PM- WRESTLING STARTS @ 1:00 PM

BOUTS ARE 3 ONE MINUTE PERIODS. MEDALS WILL BE GIVEN TO ALL PARTICIPANTS.
NYS FEDERATION RULES APPLY.

CONCESSION STAND WILL BE AVAILABLE

FOR FURTHER INFORMATION CONTACT: BRIAN DEGAETANO (631) 278-0586

I _____ the parent or legal guardian of _____ assume full Responsibility for my child in case of any injuries or losses that he/she may incur or suffer directly or Indirectly, from training, traveling to or from, or participating in the Wildcat Youth Wrestling tournament. I acknowledge that participation in this wrestling tournament is at our own risk. We hereby Release and hold harmless the Wildcat Wrestling Club, the South Huntington School District, tournament officials, referees and/or any other persons associated with the organization or operations of the tournament for any injuries or losses incurred including skin diseases. I also attest that my child has adequate medical coverage at the time of his/her participation in this event.

Parent's Signature: _____

WRESTLERS NAME _____ PARENTS SIGNATURE _____

ADDRESS _____ PHONE # _____ SCHOOL/CLUB _____

DOB _____ GRADE _____ AGE _____ WEIGHT _____

2018 USA CARD # _____

Coach's rating (circle one): 1 2 3 4 5

COMPLETED BY CLUB COACH.