

2006 AMHERST YOUTH WRESTLING TOURNAMENT

PLEASE READ ENTIRE FORM

Sunday, February 26, 2006

PLACE: AMHERST STEELE – 450 Washington Street, Amherst, OH 44001

2 GYMS, ONE DIVISION PER GYM, 2 CONCESSION STANDS WILL BE OPEN ALL DAY

DIVISIONS: I - 6 & UNDER (MAX.100) Madison system, no weight classes. (grouped within 10% of weight max.)

II - 8 & UNDER (MAX 120).

III - 10 & UNDER (MAX 150)

Brackets of 8 max.

IV - 12 & UNDER (MAX 175)

*****Age as of February 26, 2006 - BRING BIRTH CERTIFICATE OR PROOF OF AGE*****

ENTRY FEE: \$16 NO WALK-INS. (If you did not send in a form, or talk to the director-ELLIOT LEWIS prior to Noon on the 25th via the phone, You're a WALK-IN!)

WEIGH-INS: Put the EXACT weight on the tournament form, we are using the honor system – so be straight! Don't get caught wrestling above documented weight, scale will be in gym!! **1% WEIGHT ALLOWANCE FROM ENTRY FORM WEIGHT, IF WEIGHT PROTESTED ON DAY OF TOURNAMENT.** (100 lbs. = 1 lb.) Make sure you mail forms early, So they arrive before 25th! You will not be bracketed, if I don't receive it in the mail by the 25th !! ***WE RESERVE THE RIGHT TO SPOT CHECK WEIGHTS, NO QUESTIONS***

TOURNAMENT DIRECTOR HAS FINAL RULING ON ALL PROTEST! NO REFUNDS!

CUT OFF for 2006 **FIRST 500 PAID ENTRIES OVER 500 WRESTLERS LAST 2 YEARS!**

TIMES:

➤ DIVISIONS I & II SUNDAY, FEBRUARY 26,
-WRESTLING BEGINS AT **9:00AM** (CHECK-IN **7:00AM – 8:00AM**)

➤ DIVISIONS III & IV SUNDAY, FEBRUARY 26,
-WRESTLING BEGINS **1:00PM** (CHECK-INS UNTIL **12:00PM**)

CHECK IN EARLY, DON'T GET YOURSELF SCRATCHED

NO EXCEPTIONS!!!

RULES: MODIFIED HIGH SCHOOL FOR ALL DIVISIONS

- EACH PERIOD BEGINS ON FEET

-TIME PERIODS: 2, ALL DIVISIONS 1:30 - 1:30

-OVERTIME: ON FEET, FIRST TAKEDOWN, NO TIME LIMIT

-DOUBLE ELIMINATION, 12 POINT LEAD ENDS MATCH.

AWARDS: FIRST THREE PLACERS RECEIVE **TROPHIES**, 4th place medal

ADMISSION: ADULTS \$4.00 UNDER 18 \$2.00

LODGING: Motel 6 (440) 988-3266, Days Inn (440) 985-1428 both at intersection of Rt. 58 and Rt. 2, 1 mile from AHS

DIRECTOR: ELLIOT LEWIS phone/fax # 440 984 4447 OR EMAIL: ealewis@eriecoast.com

****SEND ALL REGISTRATIONS FORMS TO:**

AMHERST YOUTH WRESTLING: 818 Valley Dr. Amherst, OH 44001

***MAKE CHECKS PAYABLE TO: AMHERST YOUTH WRESTLING**

Experience Level (Not Years Wrestled) 1 2 3 4 5 circle one that applies 1= best

NAME _____ DIVISION _____ **EXACT** WEIGHT _____ AGE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

PHONE _____ DATE OF BIRTH _____ EMAIL ADDRESS _____

SCHOOL OR CLUB _____ SEASON RECORD _____ YRS. EXP. _____

I understand that the Amherst Youth Wrestling, Amherst Local Schools and all other persons associated with this tournament assume no responsibility for accidents, injuries or medical or dental expenses incurred by any and all participants.

Participant Signature Date: _____ Parent/Guardian Signature Date _____

Copy of Entry Form provided by www.OhioWrestler.com

with permission of Amherst Youth Wrestling per Elliot Lewis

