



Contact #: (516) 978-1331
Contact E-mail: info@i90events.com

1-Day Wrestling Camp & Takedown Tournament

Date: April 30th, 2011
Place: Long Island Lutheran High School
Ben's Clinic: 9:30 am - 11:30 am
Troy's Clinic: 12:00 pm - 2:00 pm
TakeDown Tourney: 3:30 pm - Finish

250 Wrestlers Maximum (Register Early to Ensure Your Spot)

Special Guest Instructors

Ben Askren

2x NCAA Division I Wrestling Champion
4x NCAA Division I All-American Wrestler
2x Dan Hodge Trophy winner
Olympic Wrestler/MMA Bellator Champion

Troy Nickerson

5x NY State Wrestling Champion
4x NCAA Division I All-American Wrestler
NCAA Division I NCAA National Championship

Payment Methods

Cash, Checks Or Register online by April 20th
Space is Limited

PLEASE REGISTER EARLY AT i90EVENTS.COM

<i>Ben's Clinic:</i>	\$40	<input type="checkbox"/>
<i>Troy's Clinic:</i>	\$40	<input type="checkbox"/>
<i>Both Clinics:</i>	\$70	<input type="checkbox"/>
<i>Tournament:</i>	\$15	<input type="checkbox"/>
<i>Both Clinics & Tourney:</i>	\$75	<input type="checkbox"/>

Make Checks Payable to:
i90 Events, LLC.
189-10 Union Turnpike.,
Flushing, NY
11366

Visit i90events.com for more info



TakeDown Tournament

Special Guest Referee Troy Nickerson

Weigh-ins: Conducted at Arrival
Rules Seminar: 3:00 pm
Tournament: 3:30 pm until the Last Man's Standing

Pairings: 4 man bracket, round robin

Weight Classes: 98-103-112-119-125-130-135-140-145-152-160-171-189-215-285

Matches: 2-1-1 (O.T. is first takedown)
Awards: i90 Championship Belt for Tournament MVP
Medals: First and 2nd place winner in each weight class.

Rules: Folkstyle rules expect when you take your opponent down you have approximately 15 seconds to turn him or he will be released and wrestling will continue on your feet. Any time the match stops you start on your feet again.

Entry Forms can be e-mailed in advance to: Tournaments@i90events.com

Contact Phone: (516) 978-1331
Contact E-mail: info@i90events.com

Admission to Competitors: \$15 admission
Admission to Spectators: \$10 Day Pass Fee

Food: Concession stands will be available

Mail Payments/Waiver by
April 20th:

i90 Events, LLC. Registration & Medical Release Form

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Age: _____ Weight: _____

E-Mail: _____

i90 Events, LLC.
189-10 Union Turnpike.,
Flushing, NY 11366

I, _____, understand that by entering this clinic/tournament I will be competing or coaching at my own risk and knowingly, voluntarily, and expressly waive any claim I may have against i90 Events owner, hired staff, and the hosting venues service contractors and their officers, directors, and any heir, successor, executor, employee, member, representative, owner or director of all of them by any third party as a direct or indirect result of my participation in any activity and employees of all of the same from and against any and all causes of action, liabilities, losses, claims, cost, damages (including personal injuries), or expenses, including reasonable attorneys' fees, arising out of or in connection with my participation in the program or any activity, contest or promotion held in conjunction with i90 Events. I understand that it is my responsibility to consult with a physician prior to and regarding my participation in The i90 Events Wrestling Clinic/Tournament. I represent and warrant that I am physically fit and I have no medical condition which would prevent my full participation.

I further understand that pictures and videos might be taken of the event and they might be shown to audiences around the world. I hereby consent to have my likeness shown, publicized, commented, and/or reported on in any and all forms of media; and I waive any compensation I might be entitled to as a result thereof in perpetuity.

I _____ (parent or legal guardian's full name), hereby certify that I am a parent or legal guardian of the above named minor; that I have read and understood every provision of this release; and that I am legally competent to and freely enter into this waiver, release and assumption of risk agreement on behalf of the minor and myself.

I HAVE READ THIS ENTIRE DOCUMENT.

I UNDERSTAND AND AGREE TO IT'S TERMS _____ (initials)