

*NYACE & POLLI-SHORE WRESTLING PRESENT....*

# **The Metropolitan Tournament of Champions**

*Sunday, November 15<sup>th</sup>, 2009*

*At Monsignor Farrell HS, NY*

*2900 Amboy Road, Staten Island, NY 10306*

## **TOURNAMENT INFORMATION:**

*\$30 Mail In or Online Registration (at [www.pollishore.com](http://www.pollishore.com)) Closes Friday at Midnight*

*\$35 Walk-Ins at weigh ins*

*Wrestling starts 9:30 am*

*Weigh ins 7:30am-8:30am Saturday, November 15, 2009*

*Make Checks payable to: NYACE*

### **Divisions & Weights:**

Elementary (Pre 6<sup>th</sup> Grade) {+1 lb} - 55, 60, 65, 70, 75, 80, 85, 90, 95, 100, 105, 112, 119, 125, 132, 160

Middle School (6<sup>th</sup>-8<sup>th</sup> Grades) {+2 lbs} - 75, 80, 85, 90, 95, 100, 105, 112, 119, 127, 135, 142, 154, 165, 180, 230

High School (9<sup>th</sup>-12<sup>th</sup> Grades) {+3 lbs} - 103, 112, 119, 125, 130, 135, 140, 145, 152, 160, 171, 189, 215, 285

Open – Madison Weights

### **Tournament Rules:**

Grades as of 2009-10 school year.

Must wear a singlet and headgear.

AWARDS FOR: 1<sup>st</sup>, 2<sup>nd</sup>, & 3<sup>rd</sup> Place

NFHS folkstyle wrestling rules.

### **Time Periods:**

Elementary School Division - 1-1-1

Middle School Division - 1.15-1.15-1.15

High School Division - 1.30-1.30-1.30

*For additional information contact:*

*Danny Mullan by email at [danm@matguardusa.com](mailto:danm@matguardusa.com)*

*Adam Polly by email at [adam@pollishore.com](mailto:adam@pollishore.com)*

# The Metropolitan Tournament of Champions 11/15/2009

## REGISTRATION FORM (All fields must be filled out)

NAME: \_\_\_\_\_

School / Club: \_\_\_\_\_

### Division & Weight - Circle One:

Elementary (Pre 6 <sup>th</sup> Grade) {+1 LB.}					Middle School (6 <sup>th</sup> -8 <sup>th</sup> Grades) {+2 LBS.}					High School (9 <sup>th</sup> -12 <sup>th</sup> Grades) {+3 LBS.}				
55	60	65	70	75	75	80	85	90	95	103	112	119	125	130
80	85	90	95	100	100	105	112	119	127	135	140	145	152	160
105	112	119	125	132	135	142	154	165	180	171	189	215	285	
160					230									

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Grade(09-10): \_\_\_\_\_ Age: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Email: \_\_\_\_\_

I hear-by declare that as a participant in this tournament I will enter at my own risk. I will not in any way hold liable the officials, coaches, Polli-Shore Tournaments, the hosting facility, or its employees for any injury that I may receive while in this tournament, or traveling to and from this tournament.

Wrestlers Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parents Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Mail To: **NYACE**  
2207 Baker Drive  
Allentown, PA 18103