



CONNETQUOT WRESTLING CLUB



3rd Annual Holiday Tournament

OFFICIAL USA WRESTLING CLUB
REGISTRATION INFORMATION

Out of state wrestlers welcome!

Sunday, December 18, 2011

Connetquot High School

190 7th St Bohemia, NY 11716

Divisions: Morning session (1st-2nd grade), (3rd-4th grade) – Afternoon session (5th-6th grade), (7th-8th grade) Limited to first 300 wrestlers.

Weight Classes: Madison Weights to be determined at weigh in and by experience. During weigh-ins, all competitors will be inspected for skin rashes. Wrestlers with skin rashes will not be allowed to compete unless they have a current doctor's note stating they are under treatment and are not contagious at present; therefore, clearing wrestler to participate. Tournament officials reserve the right to refuse entry to questionable cases regardless of note.

Awards: 1st - 2nd – 3rd Place

Competition: *Grades (1-4) Takedown Tournament* : 4-5 man Round Robin brackets. Everyone guaranteed three matches. Periods 1-1-1, wrestling begins at 9:00 AM.

Grades (5 - 8) Folkstyle : 4 -5 man Round Robin brackets. Everyone guaranteed three matches. Periods 1-1.5-1.5 wrestling begins at approximately 12:30 PM.

Weigh Ins: To be held at ***Oakdale Bohemia Middle School (wrestling room) - 60 Oakdale-Bohemia Rd. Oakdale, NY 11769*** on Thursday, December 15, 2011 from 6-8 P.M. ***Weigh ins for grades 5-8 will also be held the morning of tournament 10AM – 11AM at Connetquot HS.*** Satellite weigh ins are available by Club Coaches with approval from tournament officials; the wrestlers **MUST** be pre-registered and have paid for satellite weigh in. (NO EXCEPTIONS)

Concession: Will be available all day, many vendors and raffles to enjoy; bring the whole family.

Admission: \$2 for all spectators.....Seniors, Veterans, and kids under 10 are free.

Entry Fee: \$25.00 for pre-registration. \$30.00 for those paying day of tournament. All wrestlers will receive a tournament t-shirt. Make checks out to Connetquot Wrestling Club and mail form and check to Connetquot Wrestling Club, 265 Vanderbilt Blvd, Oakdale, NY 11769 before Tuesday, December 13, 2011. For further information or questions contact: Robert Miller @ 646-879-7970 or Email robert.miller@sprint.com

Holiday Tournament

Registration Form

NAME.....

AGE.....DATE OF BIRTH Grade.....WT.....

EXPERIENCE Circle one:

1 2 3 4 5
Beginner Intermediate Advanced

STREET.....

CITY.....

STATE.....ZIP.....

email address.....

TELEPHONE.....

2012 USAW CARD #.....

Waiver and Release from Liability

1. I, _____ the undersigned, on behalf of myself, my heirs, and next of kin, personal representatives, agents, insurers, successors and assigns (all hereinafter "Releasors") hereby FOREVER RELEASE, DISCHARGE AND COVENANT NOT TO SUE CONNETQUOT WRESTLING CLUB, INC. AND THE UNITED STATES OF AMERICA WRESTLING ASSOCIATION, INC., its insurers, its affiliate clubs, administrators, agents, directors, officers, state organizations, members, committees, volunteers, all employees of USA Wrestling, and any and all participants, officials, referees, coaches, host clubs, sponsoring agencies, sponsors, advertisers, local organizing committees (and if applicable) owners, lessors, and operators of premises used to conduct any USA Wrestling sanctioned event, meet, practice or activity (all hereinafter "Releasees") from any and all liabilities, claims, demands, causes of action or losses of any kind or nature, past, present or future, direct or consequential that I may hereafter have for PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANYOTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, arising out of my participation in, attendance at or traveling to and from any USAW wrestling sanctioned event or activity including, but not limited to, LOSSES CAUSED BY THE PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used. 2. Releasor understands and acknowledges that USA Wrestling sanctioned activities and the sport of wrestling in general have inherent dangers that no amount of care, caution, training, instruction, supervision, or expertise can eliminate. RELEASOR EXPRESSLY AND VOLUNTARILY ASSUMES ALL RISK OF PERSONAL INJURY, PERMANENT, TEMPORARY, TOTAL OR PARTIAL DISABILITY, DISFIGUREMENT, PARALYSIS AND ANY OTHER LOSSES OR DAMAGES TO PERSON OR PROPERTY OR DEATH, sustained while participating in, attending, preparing for or traveling to and from any USA Wrestling sanctioned event, meet, practice or activity, including the risk of PASSIVE OR ACTIVE NEGLIGENCE OF THE RELEASEES, or hidden, latent or obvious defects in the facilities or equipment used. 3. Releasor acknowledges and fully understands that each participant in any USA Wrestling sanctioned event, meet, practice or activity, including Releasor, will be engaging in activities that involve risk of serious injury, including permanent, temporary, total or partial disability, disfigurement, paralysis and other losses to person or property, including death, and that severe social and economic losses may also result not only from Releasor's own actions, inactions or negligence, but also from the actions, inactions or negligence of others notwithstanding the rules of play or the condition of the premises or of any equipment used. Furthermore Releasor acknowledges and fully understands that there may be other associated risks with such activities which are not known or not reasonably foreseeable at this time. I ACKNOWLEDGE THAT I HAVE HAD SUFFICIENT OPPORTUNITY TO REVIEW THE PROVISIONS OF THIS DOCUMENT AND UNDERSTAND ITS PURPOSE, MEANING AND INTENT.

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(Participant's Signature) (Print Name) DATE

The undersigned _____ does hereby represent that he/she is, in fact, the parent or guardian of _____ and acting in such capacity agrees to the terms and conditionsof the above stated waiver and release.

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(Signature of Parent or Legal Guardian) (Print Name) DATE (Relationship to Minor).....

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