

**NASSAU STATE QUAILIFER
NASSAU USA WRESTLING TOURNAMENT SERIES #2 AND #3
FRIDAY APRIL 15 and SATURDAY APRIL 16, 2011
GARDEN CITY HIGH SCHOOL**

ELIGIBILITY: THESE TOURNAMENTS ARE OPEN TO ALL HIGH SCHOOL, MIDDLE SCHOOL, AND YOUTH WRESTLERS.

FORMAT: BOTH TOURNAMENTS WILL BE RUN WITH BRACKETS (ALL WRESTLERS WILL GET AT LEAST 2 MATCHES)

REQUIREMENTS: USA WRESTLING COMPETITORS CARD FOR WRESTLERS ALL COACHES MUST HAVE A USA COACHES CARD

UNIFORM: RED AND BLUE SINGLET OR RED/BLUE REVERSIBLE SINGLET THEY WILL BE FOR SALE THE MORNING OF THE TOURNAMNET.

ENTRY FEE: \$35 Checks payable to Nassau USA wrestling FOR BOTH TOURNAMNETS AND \$25 FOR ONE TOURNAMNET

AWARDS: MEDALS 1ST -4TH PLACE

WEIGHT CLASSES: 96,103,112,119,125,130,135,140,145,152,160,171,189,215,285 PLUS 3LBS. (THIS IS FOR BOTH TOURNAMENTS) SCHOOL BOY AND YOUTH WILL BE MADISON

FRIDAY APRIL 15- GRECO ROMAN TOURNAMNET-

REGISTRATION: WEIGH-IN AND SKIN CHECK: 4:00PM-5:00PM

RULES CLINIC: 5:00PM

WRESTLING BEGINS: 5:30PM- WRESTLING WILL CONTINUE TILL 9:30PM. IF NOT COMPLETED WRESTLING WILL CONTINUE ON SATURDAY MORNING AT 8:00AM TILL FINISHED

SATURDAY APRIL 16,2011- FREESTYLE-

REGISTRATION: WEIGH-IN AND SKIN CHECK 7:00AM-8:00AM

RULES CLINIC-8: 30AM

WRESTLING BEGINS -9:00AM

FOR FURTHER INFORMATION CONTACT MIKE LEONARD AT THE FOLLOWING:

(516) 297-3876 OR BAM197@AOL.COM

NAME _____ **DATE OF BIRTH** _____

STREET _____ **CITY** _____

STATE _____ **ZIP** _____ **E-MAIL ADDRESS** _____

TELEPHONE _____ **2011- USAW CARD #** _____

We, the parents/guardians of _____ assume full responsibility for our child in case of any injuries he or she may receive traveling to, during or traveling from the wrestling tournament held at WT.Clarke H.S. on April 2, 2011 or associated registration and/or weigh – ins. This contest indicates that we will assume all responsibilities for accident insurance and will hold harmless the tournament officials, referees, volunteers, coaches, all members of the Rams Wrestling Club and the East Meadow High School District and their agents.

Parent/Guardian Signature _____

Signature indicates permission to participate as well as acknowledgement of adequate medical coverage in case of injury.

