

5th Annual Kathy Wagner Memorial Youth Wrestling

Folk Style Tournament

DATE: Sunday, February 3rd

Check in starts at 8:00am/wrestling starts at 9:00am

LOCATION: Eastport/ South Manor HS (543 Moriches Middle Island Road, Manorville, NY, 11949)

DIVISIONS: (1st & 2nd)(3rd & 4th)(5th & 6th) (7th & 8th)

Madison system will be used to determine weight class

Bout times up to 6th grade will be 1, 1, 1

7th and 8th grade will be 11/2, 1, 1

Weigh-ins will be done by the coaches and all the weights and permission slips must be handed in by Wed. Jan. 30th

Please make checks payable to ESMSA Wrestling

Mail to 14 Par Drive, Manorville, NY 11949

USA cards are required

Registration fee is \$25

INFORMATION: call Keith Wagner at 631-905-7175 or e-mail me at wrestling@esmsports.com

Wrestler's name _____ DOB _____

Club Name _____ USA card # _____

Age/Grade _____ Weight _____ Phone# _____

Coaches rating 1 2 3 4 5

I _____ THE PARENT OR LEGAL GUARDIAN OF _____ ASSUME FULL RESPONSIBILITY FOR MY CHILD IN CASE OF ANY INJURIES OR LOSSES THE HE/SHE MAY INCUR OR SUFFER DIRECTLY OR INDIRECTLY, FROM TRAINS, TRAVELING, TO GO FROM OR PARTICIPATING IN THE SHARKS YOUTH WRESTLING TOURNAMENT. I DO ACKNOWLEDGE THAT PARTICIPATION IN THIS TOURNAMENT IS AT OUR OWN RISK. WE HEREBY RELEASE AND HOLD HARMLESS THE SHARKS YOUTH WRESTLING CLUB, THE ESM SCHOOL DISTRICT, THE TOURNAMENT OFFICIALS, REFEREES, OR ANY OTHER PERSON ASSOCIATED WITH THE ORGANIZATION OR OPERATION OF THE TOURNAMENT FOR ANY INJURIES OR LOSSES INCURRED.

WRESTLER'S SIGNATURE _____ PARENT SIGNATURE _____