



Registration Form

Limited to the first 500 wrestlers | Mail-in entries only will be seeded

Date: Saturday, February 13, 2010

Place: Riverside High School, One Warrior Way, Belle, WV

Hosted by: Riverside High School, Riverside High School Booster Club

Weigh-Ins: 6:30 am - 8:00 am — Wrestling will begin at 8:30 am

Age Divisions:

- 6 & Under: 35, 40, 45, 50, 55, 60, lhy 80, unl
- 7 - 8: 45, 50, 55, 60, 65, 70, 75, lhy 110, unl
- 9 - 10: 55, 60, 65, 70, 75, 80, 85, 90, 100, lhy 140, unl
- 11 - 12: 70, 75, 80, 85, 90, 95, 100, 120, lhy 160, unl
- 13 - 15: 80, 85, 90, 95, 100, 105, 115, 125, 135, 145, 155, lhy 205, unl

Eligibility: Age as of February 13, 2010. No weight changes. Wrestlers not making weight will forfeit. Both wrestlers are required to provide proof of age if challenged. Tournament Committee has the right to combine weight class to insure 3 wrestlers per weight class. Wrestlers are limited to one weight class per age group. Four to six mats will be used. 13-15 may enter two weight classes. All others may enter two age brackets.

Registration: \$15.00 / \$20.00 for walk-ins (They will be placed in brackets at weigh-in.)
 \$10.00 per wrestler if submitted as one team check. No refunds. No phone entries.
 Make checks payable to Riverside High School.
 Mail checks to Roy Gayton, 6643 Roosevelt Avenue, Charleston, WV 25304

Entry Deadline: Mail-in entries must be received by **February 10, 2010.**

Admission: Adults - \$4.00 / Students - \$3.00 / Preschool - Free

Awards: Top four wrestlers in each weight class receive trophies. Team trophies to top three teams. Participation awards will be given to those not placing in their weight class.

Rules: Scholastic regulations and rules apply; except for bout length which is three one minute rounds (1:1:1). Overtime sudden death. Double elimination tournament. **Referee's decisions are final!**

Information: Call Roy Gayton, Tournament Director at (304) 550-2936.

----- CUT HERE AND RETURN THIS PORTION WITH ENTRY FEE -----

MAIL TO : Roy Gayton, 6643 Roosevelt Avenue, Charleston WV, 25304

Age Division: _____	Weight Class: _____
Birthdate: _____	Age(as of 02.13.10): _____
Name: _____	Phone: _____
Address: _____	Coach: _____
_____	Team: _____
City/St/Zip _____	Record: (W) _____ (L) _____

Please enter me in the above wrestling tournament. I am hereby legally bound and waive all claims to injury and damage which I may have against Riverside High School, DuPont Middle School, individuals, and the Kanawha County BOE, tournament officials, committee and referees.

Signature of Wrestler

Signature of Guardian

Date