



# Clay County 14<sup>th</sup> Annual Danny Suite Memorial Tournament January 19, 2020

**Place:** Clay County High School, 1 Panther drive, Clay, WV 25043  
**Entry Fee:** \$15.00 Team mail ins of ten or more received by 1/16/20  
 \$20.00 Mail in received by 1/16/2020  
 \$25.00 Email, Texts, Call in's (Deadline 1/16/20 by **9:00 p.m.**) **NO WALK-INS**

**TOURNAMENT WILL BE LIMITED TO THE FIRST 300 ENTRIES!!!**

**Mail entries to:** **Clay Jr. Wrestling**      **Call Ins:** **Malinda Stewart: 304-553-3107 Text only 8 am til 4 pm**  
**P.O. Box 452**      **Calls from 4:30 P.M. to 9: 00 P.M.**  
**Clay, WV 25043 (Make**      **Or email: malindaastewart@gmail.com**  
**checks payable to**      **TJ Legg: 304-286-5477(home) or 304-651-9426 (cell)**  
**CCJW)**      **terry.a.legg@wv.gov**

**Weigh Ins:** Sunday, January 19, 2020 – CLAY COUNTY HIGH SCHOOL 6:30 am – 8:00 am  
 Scratch Meeting to follow. Take Down Tournament will be held during the scratch meeting – 5 take downs will win award. \$5.00 fee to enter.

**Rules:** Double Elimination. Wrestlers will wrestle three one-minute periods. Scholastic rules apply with sudden death overtime. **LIMIT TWO ENTERIES PER WRESTLER IN DIFFERENT AGE BRACKETS.** We reserve the right to combine weight classes. \$10.00 to move up a weight class. Proof of age “if challenged.” Blind draw, every effort will be made to split wrestlers from the same team.

**Awards:** Individual awards given 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup>, & 4<sup>th</sup> place finishers in each weight class.

**BREAKFAST AND LUNCH FOODS WILL BE AVAILABLE**

**(Return this portion only)**

**WEIGHT CLASSES (Age as of January 1, 2020! Please circle only one and copy form for a second entry!)**

4 & Under	35	40	45	50	HWT	65MAX											
5 & 6	40	45	50	55	60	HWT	75max										
7 & 8	45	50	55	60	65	70	75	85		HWT	120max						
9 & 10	55	60	65	70	75	80	85	90	95	105	125		HWT (160 max)				
11 & 12	65	70	75	80	85	90	95	100	105	115	125		135	145	160	HWT	(200 max)
13 & 15	78	84	90	95	102	110	116	123	128	135	145		155	171	190	HWT	(285 max)

**(NO HIGH SCHOOL STUDENTS ARE PERMITTED TO WRESTLE)**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Age Group: \_\_\_\_\_ Weight Class: \_\_\_\_\_ Birthdate: \_\_\_\_\_  
 Coaches Name: \_\_\_\_\_ Team: \_\_\_\_\_

**Clay county High School, WYVWA and Clay Jr. Wrestling League will not be responsible for any accident or injury that occurs during this event, or property losses. I will be personally responsible for any injury to myself or my wrestler during this event. I have read and fully understand this document. My signature indicates I agree with, and will abide by, its contents.**

PARENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_