

# Full Contact Productions Presents

## The First Annual May Madness Wrestling Tournament

**Where:** All Star Sports Arena 557 East Ridge Road Rochester, NY 14621.

**Clinic:** Mike McNally, Head clinician at G2 World Wrestling Academy from 8:30 – 9:30. Set ups and takedowns

**When:** Saturday, May 18th, 2013. Weigh-in & skin checks – 7am-8:30am. Coaches meeting at 9:00am

Wrestling will begin at 9:30. Athletes that are over their pre-registration weight by 2lbs will be disqualified and no refund will be available. Wrestlers are allowed to compete in two age groups. Please contact tournament director if interested. Athletes will have to fill out and pay for both registrations. **NYS certified trainer on site**

**Fee:** \$18.00 Make check or money orders payable to Full Contact Productions and mail to: 1555 Lyell Ave Ste. 137 Rochester, NY 14606. No REFUNDS will be given for missed weight or failure to wrestle for any reason.

**\*\*\*No walk -in registration allowed the day of tournament. Proof of age may be challenged.\*\*\***

**How:** Limited to 250 wrestlers for this **pre-registration Folkstyle wrestling** event. All registrations must be postmarked by 05/11/13. *(Not responsible for mail received after 05/15/13).*

**Age:** As of the day of the event, 6 and under, 7-8, 9-10, 11-12, 13-14, High School (Madison style grouping within 12%). Participants will be grouped by age, weight, and experience where possible. 8<sup>th</sup> graders may participate in the High School Division. Graduating Seiners welcomed.

**Awards:** Medals 1st – 4th place along with Champions T-shirt. Criteria: Head up, Pins, Total points for/against.

**Rules:** 1-1-1 NYS rules. Singlet's not required, headgear optional, OT is 1 minute take down then 30sec ride out (flip or if tied 1<sup>st</sup> pts scored has choice). Madison style bracketing system used. Grouping of weights between 10% - 12% **Certified NYS officials** will be used for all divisions on 4- 5 full mats. Exhibitions if a NYS official is available.

***This is a Pre-registration Round Robin Wrestling Tournament (5 man when possible)***

\*\*\*\*\* Registration \*\*\*\*\*

**Wrestlers Name:** \_\_\_\_\_ **Age:** \_\_\_\_\_ **Weight:** \_\_\_\_\_ **DOB:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Address:** \_\_\_\_\_ (City, State, and Zip) **Gender:** M / F

**Home Phone:** \_\_\_\_\_ **Secondary Phone:** \_\_\_\_\_ **High School Division:** YES / NO

**Parents/Guardian Full Name:** \_\_\_\_\_ **Relation:** \_\_\_\_\_ **Years of experience:** \_\_\_\_\_

**Emergency contact number:** \_\_\_\_\_ **Insurance Carrier & Policy #:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **School or Club:** \_\_\_\_\_

### Full Contact Productions, Inc. Waiver

**Waiver for Participation:** I hereby understand and acknowledge that there is some risk inherent in all recreational activities. I acknowledge that Full Contact Productions does not provide accident or medical insurance for the program participants. I fully understand that I must provide proper medical insurance coverage for myself and/or my child. I give permission for a licensed physician, EMT, and or hospital staff to administer emergency medical care deemed necessary for person(s) listed below when parental permission is unavailable. I agree to hold Full Contact Productions, its employs, and officials harmless for and accident, injury, or other cause of action occurring while I and/or my child participate in this program. Anybody with a questionable skin condition may be removed from the tournament at any time. Misconduct, child abuse or misbehavior toward officials and/or Full Contact Productions staff by parents or athletes will result in automatic expulsion from the tournament and All Star Sports Arena grounds. Tournament directors have the right to remove anyone not complying with tournament rules.

Parents/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Tournament Director:** Adam Burgos at [adamburgos@g2wrestling.com](mailto:adamburgos@g2wrestling.com) for questions or concerns.

