# FALCON GOLD YOUTH WRESTLING TOURNAMENT

AT SOUTH SENECA HIGH SCHOOL, 7263 MAIN ST, OVID NY Sponsored by Four Town Community Center SUNDAY, MARCH 9<sup>TH</sup>, 2014

Wrestlers will be grouped according to actual weight (within 10% wherever possible). Random seeding. 4 -6 man round robin format used wherever possible, so most wrestlers will get minimum of 3 matches.

AGE GROUPS: 6 & under , 7/8, 9/10, 11/12, 13/14 (no JV or varsity experience)

## SPLIT SESSION by age groups:

**6 & under** • **7/8** • **9/10** – Check- in **& weight checks** from 7:30 -8:30 a.m. Wrestling to start at 9:30 am or as soon as possible.

**11/12** • **13/14** – Check-in **& weight checks** from 11 am –noon. Wrestling to start as soon as possible after morning session.

### **REGISTRATION & ENTRY FEES:**

#### Pre-registration required; NO WALK-INS

\$20 per wrestler if paid with pre-registration, \$23 at check in on tournament day (must still pre-register)
Checks payable to *Four Town Community Center*. No refunds.
\$2 spectator admission, students & children free.

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#### ENTRY DEADLINE:

Registration forms & pre-payment must be received NO LATER than 5pm on Fri, Mar 7<sup>th</sup> NO WALK-INS

## Mail to: Ken Sweet, 7032 County Rd 132A, Ovid, NY 14521

If paying at check-in, registrations may be e-mailed to <u>jdwag@empacc.net</u> \*please request reply confirmation if sending by email, and inquire if you do not receive one!\*

AWARDS: T-shirts for individual champions, medals for all participants.

Team trophies for top 3 teams – top 10 placers count toward team score.

For questions or further information: Ken Sweet 607-379-1176 csweet001@rochester.rr.com

### **Tournament rules & general information:**

High School Folk Style wrestling. Certified referees. OT period 1 minute sudden victory followed by 30-second tiebreaker if necessary. Concessions available all day. No smoking on school grounds

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REGISTRATION FORM – MUST BE RECEIVED BY FRI MARCH 7, 5PM

\*\* Weight will be verified at check in \*\*

Club or team name:\_\_\_\_\_

Coach:\_\_\_\_\_ Coach contact phone #\_\_\_\_\_

Last Name	First Name	Age	Weight	Contact phone #