

23nd ANNUAL KITTATINNY SUMMER WRESTLING TOURNAMENT

SATURDAY, JULY 12th, 2014 – FORMAT IS ROUND ROBIN

Location: Kittatinny Regional High School, 77 Halsey Road, Newton, NJ 07860

Entry Fee: \$20.00 Pre-Registered Post marked by 07/4/2014

\$25.00 Walk-Ins (Collected at Weigh-Ins)

Make check payable to: Hampton Sandyston Wrestling Club (HSWC)

Pre-Registration can be mailed to the following address:

HSWC

PO Box 182

Layton, NJ 07851

*****ANY RETURNED CHECK AFTER TOURNAMENT \$25.00 fee to be
added*****

Any questions please call: Michele Molfetto at 973-579-7525, cell 862-354-4009 or
tdc3@ptd.net

Local hotel information can be provided for wrestlers coming from long distances.

*****For long distant travelers, satellite weigh ins available, please contact Michele
Molfetto*****

Weigh-Ins: At Kittatinny Regional High School, Pre-Registered & Walk-Ins will be Friday
July 11th from 3:00 to 5:00pm in the wrestling room. Entrance will be around the back
of the high school,

Pre-Registered Only on Saturday July 12th, 2014 for weigh-Ins, which will be from
7:30 to 8:30am.

On Line Registration: <http://eztours.com/onlinereg.php>

Head Gear mandatory , singlets are optional, but must have shorts and tight fitting tee
shirt to wrestle in.

Medals for 1st thru 3rd awarded for each division.

Tournament Director reserves the right to combine weights to make proper size
brackets.

Schedule: Gym will open at 8:30am. Wrestling will begin at 9:30am on 5 mats, all
divisions

3 in the main gym and 2 in the JR high gym.

FOOD AND DRINKS WILL BE AVAILBLE ALL DAY!!!!!!!

Admission: \$3.00 for adults, \$2.00 for children and seniors.

Division: THE MADISON SYSTEM WILL BE USED TO DETERMINE WEIGHT CLASSES

A = 6 & Under MATCHES WILL BE 1-1-1 FOR 6,8,10 & 12 & Under divisions

B = 7 & 8 1-1:30-1:30 FOR 14 & Under and HS DIVISION

C = 9 & 10 ROUND ROBIN Brackets may vary in size; each wrestler is guaranteed 3 matches.

D = 11 & 12 (AGE AS OF DAY OF TOURNAMENT, HS DIVISION FOR 2012/13 YEAR)

E = 13 & 14

F = HS DIVISION

Wrestlers Name_____ Home Phone_____

Cell_____

Age_____ DOB_____ Grade_____ Current WT_____

(CIRCLE ONE DIVISION) 6 & Under 7&8 9&10 11&12 13&14 High School

Street_____ City_____ State_____

Zip_____

Team, School or Club to be listed on brackets:

E-Mail Address:

I, the undersigned, hereby declare that I am accepted to participate in the Kittatinny Recreational Wrestling Tournament. I do so at my own risk and of my own free will, I will not , in any way, hold liable the sponsors, tournament officials, Hampton TWP, Kittatinny School District, or referees, for any injuries or loss that I might receive, directly or indirectly, while traveling to or from or competing therein.

PARENT/GUARDIAN

SIGNATURE:_____ DATE:_____