

2015 Joshua Allen Memorial

Location: MINISINK VALLEY MIDDLE SCHOOL
Route 6, Slate Hill New York 10973
(Building is located in back part of campus)

Date: Saturday, January 31st. Doors open at 7AM

Start Time: Split Session 9:00 AM Pee Wee, Bantam & Midget------(check in by 8:30)
1:00 PM Junior & Intermediate------(check in by 12:30)

Weigh-Ins: Honor system. Teaching your child honesty is far more important than any wrestling victory. Weight checks will be given by the tournament staff, and any wrestler that weighs in any more than 2 pounds over the weight they are listed at will be asked to leave the tournament without a refund. No exceptions.

Divisions: Pee Wee (2008 & 2009) *Divisions determined by year of birth
Bantam (2006 & 2007) *Birth Certificate must be available if requested
Midget (2004 & 2005) *Wrestlers may enter more than 1 division (pay 2x)
Junior (2002 & 2003) *Madison weights based on registered weights
Intermediate (2000 & 2001) *AM session bouts 1-1-1, PM session 1:30-1:30-1:30

Awards: Beautiful Trophies for 1st, 2nd and 3rd place, including 1 MOW for each age group.
Medals for the balance of wrestlers in pools of more than 3 wrestlers.

Entry Fee: \$25. *Registrations must be received no later than Thursday, January 29th.*

Admission: \$5 adults, children are free

Concession: Food will be available all day. No food or beverages are allowed in the gym

Registration Form

Wrestler: Last Name _____ First _____

Phone (_____) _____ Date of Birth _____

Age/Division _____ Weight _____

School/Club Affiliation _____ Experience: 1st year 2nd year 3+

In consideration of your acceptance of this application I give my child permission to enter this tournament at his/her own risk. I hereby release any and all claims I may have against the officials, referees, sponsors, Minisink Valley Warrior Wrestling Club, Minisink Valley Central School District and it's employees, and USA Wrestling from any liability for any discomforts, injuries, or losses suffered by my wrestler or by myself directly or indirectly as a result of traveling to and from, or competing in this tournament.

Parents Signature _____

Complete all information on entry form and include a copy of birth certificate. Enclose a check or money order made payable to: MV Warrior Wrestling Booster Club and mail to: Dan Gallo 103 Bergen Circle Slate Hill, NY 10973
Any Questions call Dan Gallo @ 845-399-4699 or email me @ dgallo@minisink.com and I will get back to you ASAP.