

SUPERVISOR
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**DEPARTMENT OF PARKS
RECREATION & FORESTRY**

INTERIM GENERAL CREW CHIEF
Mark D. Lubera

525 Pavement Road
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**Town of Lancaster Youth Wrestling Tournament
Sunday, February 8, 2015**

Location: Lancaster High School Field House - 1 Forton Drive, Lancaster, NY 14086
Entry Fee: \$20 registration fee (check payable to "Town of Lancaster") This is a pre-registration tournament. **NO WALK INS!** Mail registration form and check by **February 5th** to:
Town of Lancaster Recreation Department
525 Pavement Road
Lancaster, NY 14086

This is a USA Wrestling tournament. You must have a USA card. **USA cards may not be purchased at the door.** To purchase a USA card, visit www.themat.com

Time: Weigh-ins Sunday, February 8, 2015 7:00am-8:30am.
If you don't make weight, you can not wrestle!

Contact: Karl Schurkus, 716-799-3312 or karlschurkus@yahoo.com

Divisions: Ages as of February 8, 2015 (we reserve the right to combine weight classes of two or less). There will be Novice Divisions (we will do our best to match years of experience). **No JV or Varsity experience.**

Division Name	Age	Weights
Pewee	6 & under	37,40,45,50,55,60,65, HWT (max 115)
Bantam	7 & 8	45,50,55,60,65,70,75,80,85,95, HWT (max 115)
Midget	9 & 10	55,60,65,70,75,80,85,90,95,105,115, 125, HWT (max 145)
Junior	11 & 12	65,70,75,80,85,90,95,100,110,120,130,140,150, HWT (max 170)
Schoolboy	13 & 14	80,88,96,103,112,120,130,140,150,160,175, HWT (max 190)

Rules: NY High School modified. Overtime will be 1:00 minute with :30 second ride out (choice goes to first point scored or disc flip if no score) Period lengths will be 1-1-1 for divisions 1-3 & 1:30-1:30-1:30 for divisions 4 & 5. All matches will be wrestled on **8 FULL MATS IN 1 GYM!**

Awards: 1st 2nd 3rd - Champion t-shirt, Team trophies for 1st 2nd 3rd **Ten Wrestlers per team**

Admission: Adults \$2.00 students \$1.00, children under 5 free

FOOD WILL BE AVAILABLE THROUGHOUT THE DAY
*******NO SMOKING ALLOWED ON SCHOOL GROUNDS*******

Name: _____ **DOB:** _____ **Age:** _____ **Weight:** _____

USA#: _____ **School/Club:** _____ **Club Contact #** _____ **NOVICE:** Y/N _____

Experience: (not years wrestled)

Circle which applies: (1 = Beginner and 5 = Very experienced/wins most matches 1 2 3 4 5

In consideration of your acceptance of my entry, I hereby release the Town of Lancaster Youth Wrestling, Lancaster Central School District and its employees, interim administrators, authorized volunteers and committee members, student teachers, auxiliary instructors and members of the Board of Education, and officials of this tournament from any claims, liabilities of right for damage for any injuries or losses suffered by me directly or indirectly in training for, traveling to and from and/or participating in the Youth Wrestling Tournament. I have my own insurance.

Signature of Wrestler _____ **Date** _____

Signature of Parent _____ **Phone #** _____ **Date** _____