

# THE SPARTAN "300"

## FUTURE STARS WRESTLING TOURNAMENT

WHEN: SUNDAY, FEBRUARY 28<sup>th</sup>, 2016

WHERE: OCEAN TOWNSHIP HIGH SCHOOL  
550 WEST PARK AVE, OCEAN TOWNSHIP, NJ 07712

STARTING TIME: 9:00 AM for TOTS & BANTAMS

STARTING TIME: 1:00 PM for MIDGETS, JUNIORS & INTERMEDIATES

WEIGH-INS: ALL DIVISIONS at OCEAN TOWNSHIP HS  
6:00 PM to 8:00 PM, THURSDAY, FEBRUARY 25<sup>th</sup> 2016

SATELLITE WEIGH-INS AVAILABLE UPON REQUEST

Contact Clay Fillian (732) 496-1965 or [clayton.fillian@gmail.com](mailto:clayton.fillian@gmail.com)

ELIGIBILITY: LIMITED TO THE FIRST "300" REGISTERED WRESTLERS  
NO TOP 3 PLACERS IN YOUR LEAGUE TOURNAMENT,  
NO STATE PLACERS OR NO PLACERS IN ANY ADVANCED TOURNAMENT

WEIGHT CLASSES: MADISON WEIGHT SYSTEM WILL BE USED

TOT (5-6 years old, as of January 1, 2016)

BANTAM (7-8 years old, as of January 1, 2016)

MIDGET (9-10 years old, as of January 1, 2016)

JUNIOR (11-12 years old, as of January 1, 2016)

INTERMEDIATE (13-14 years old, as of January 1, 2016)

ENTRY FEE: EARLY REGISTRATION IS \$25.00, \$ 30.00 AT THE DOOR

TEAM DISCOUNTS AVAILABLE UPON REQUEST

CHECK-IN: DAY OF TOURNAMENT, 7:30 AM - 8:30 AM for TOTS & BANTAMS

CHECK-IN: DAY OF TOURNAMENT, 11:30 AM - 12:30 PM for MIDGETS, JUNIORS & INTERMEDIATES

AWARDS: OVER 2' HIGH TROPHY FOR FIRST PLACE

RULES: SCHOLASTIC RULES APPLY

FORMAT: BRACKETS

RANDOM SEEDING (separation by town, where possible)

ADMISSION: ADULTS - \$ 5.00 & CHILDREN - \$ 3.00

Ocean Township Wrestling Association

PO Box 2211

Ocean, NJ 07712



Fully staffed cafeteria with great food from Ocean's renowned Café. Tee shirt vendor will be onsite.

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## FUTURE STARS WRESTLING TOURNAMENT

### DIVISIONS & TIME PERIODS (MINUTES)

TOT DIVISION - 1:00, 1:00 & 1:00  
BANTAM DIVISION - 1:00, 1:00 & 1:00  
MIDGET DIVISION - 1:00, 1:00 & 1:00  
JUNIOR DIVISION - 1:00, 1:30 & 1:30  
INTERMEDIATE DIVISION - 1:00, 1:30 & 1:30  
All Overtimes Will Be :30 Seconds

Register online: <https://wrestlereg.com/mysql/index.php?id=306>

### DO NOT WRITE IN THIS BOX FOR OFFICIAL USE ONLY

Name: \_\_\_\_\_ Division: \_\_\_\_\_ Weight: \_\_\_\_\_

Town/Club: \_\_\_\_\_ Experience: \_\_\_\_\_ Notes: \_\_\_\_\_

### TOURNAMENT REGISTRATION FORM

Complete entire form [PRINT CLEARLY] and return to the attention of the Tournament Director at the below address

Wrestler's Name: \_\_\_\_\_ Home Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Cell Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_ Town or Club Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Estimated Weight: \_\_\_\_\_ Division: \_\_\_\_\_

Circle Experience Level:      Future Star (3 plus years experience)      Novice (2 years or less experience)

**Please enclose a \$ 25.00 check to the address below  
Registration Tournament Open to the First "300" Wrestlers  
NO REFUNDS**

I agree to let my child wrestle in the 2016 Spartan "300" 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, the host school district, or referees for any injury or losses that I, or my child, might receive directly or indirectly from traveling to or from, or competing therein. I certify that information given on this registration form is correct. I understand that if my child has any suspicious skin markings, he may not be allowed to enter the tournament without a medical doctor's note stating the wrestler is free of any contagious skin conditions.

Name of Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Signature of Parent or Legal Guardian: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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