

THE 8TH ANNUAL WRESTLE FOR HOPE TOURNAMENT **TOP 100 TOURNAMENT**

"BENEFITING BRAIN INJURED CHILDREN AND THEIR FAMILIES"

DATE & TIME Sunday, March 5, 2017 Wrestling begins at 9:00 am All mailed entries must be received by February 27, 2017

LOCATION Nazareth Area High School 501 E Center St Nazareth, PA 18064

WEIGH-INS Saturday, March 4, 2017 9:30-11:30 am (Pen Argyl High School Wrestling Room) 3:00-5:00 pm (Nazareth High School Gym)

RULES: Wrestlers may enter only one division.

- PIAA modified rules and PIAA Certified Officials.
- Headgear and singlet are optional.
- All Bout times will be 1-1-1 All overtime will be sudden death.
- Double elimination Proof of age should be available if challenged.
- Classes with less then four wrestlers may be combined by tournament committee.

DIVISIONS

Wrestler Signature

Div. I (6 yrs. and under) Wts. 40, 45, 50, 55, 60, 65

Div. II (8 yrs. and under) Wts. 40, 45, 50, 55, 60, 65, 70, 75, 80

Div. III (10 yrs. and under) Wts. 50, 55, 60, 65, 70, 75, 80, 85, 90, 100, 110

Div. IV (12 yrs. and under) Wts. 65, 70, 75, 80, 85, 90, 95, 100, 110, 120

Jr High (14 yrs. and under) 75, 80, 85, 90, 97, 104, 110, 115, 122, 130, 138, 145, 152, 160, 170

Register & Pay ONLINE at LaurensHopeFoundation.com -> EVENTS -> Wrestle for Hope Entry Fee: \$27.00 – MUST BE RECEIVED BY March 2, 2017. NO REFUNDS!!

Awards: Trophy will be awarded for 1st place; medals for 2nd and 3rd.

TRAINING OR TRAVEL TO OR FROM THE TOURNAMENT OR COMPETING THEREIN.

Each wrestler is guaranteed to receive a shirt if registered by Feb. 21, 2017; after that, shirts available while supplies last.

Only the first 350 applications will be accepted. No walk-on's the day of wrestling

Info: Call Tournament Coordinator Ann Flood @ 610-703-2423

Admission: Adults \$5.00 (including coaches), Children \$3.00

Meals: Reasonably priced food will be available in the cafeteria. Absolutely no food or drink in the gym!

Date

Cut Here	Cut	Here
Wrestler Information Name	Mail This Form to: Make checks payable to: Ann Flood Lauren's Hope Foundation, Inc. 2157 West Del Road	
	Bath, PA 18014 Parent/Guardian Contact Information	
Age on date of tournament Date of Birth		
	Name	
Wt. Class Division	Phone email	
School/Team Name Grade	Mailing Address	
Shirt Size YouthSML		
AdultSMLXL	City/State/Zip	
ANY WAY HOLD LIABLE THE TOURNAMENT DIRECTORS, OFFIC	HEY ARE ENTERING AT THEIR OWN RISK AND FREE WILL AND I WILL NOT IN CIALS, NAZARETH AREA SCHOOL DISTRICT, ANY COACHES AND/OR MEMBERS OI NIURIES OR LOSSES THAT MAY BE RECEIVED DIRECTLY OR INDIRECTLY FROM	R

Parent/Legal Guardian Signature

Date