MARION YOUTH WRESTLING BOOSTERS

Gene Mills Eastern Nationals Qualifier

Tournament Saturday January 21, 2017

Wrestler's Name	Birth Date Phone			
Address				
Weight	Experience	Present Age	Present Grade_	
Parent/Guardian	Name(s)		Phone	
Town / Team Nat	me			
responsibility for any this event. I hereby a	y medical cost incurre accept any the obligat	ct sport and that there is risk o d if my child needs medical al iion to be responsible for my c from any liability to my child	ttention due to injuries su hild and myself and to rel	stained while participating in
Parent or Guardian Signature			Date	
Wrestler Signature	P Date			
				cut and save bottom half
Location:	Marion High School 4034 Warner Road Marion, N.Y. 14505			
Details: Awards:	Saturday January 21, 2017 (WALK IN REGISTRATION) Split Session - 4 man round robin bracketing 5/6, 7/8, 9/10 - Weigh in / Registrations 7:00 am to 8:30 am - Wrestling to begin at 9:00 am 11/12, 13/14 - Weigh in / Registrations until 11:00 am - Wresting to begin at Noon (completion of am session) Certified Officials NO J.V. or Varsity Experience (3) one minute periods Food available all day Tournament director reserves the right to combine weight classes for better wrestling. Big Trophies 1 st (24"tall) Trophies for 1st -4 th - Top (4) finishers in each class			
qualify for Gene		(24 tail) Tropnies J	or 1st -4 - 1 op (4)	jinisners in each class
Registration	<u>:</u> \$25.00 per wr			
Contact: Rol		le to: MYWBC Club Pres. <u>Roberttra</u>	ppp3@amail.com (585)770- <i>424</i> 0