

44th Annual South Plainfield
Wrestling Tournament
Sunday, February 18th, 2018



Where: South Plainfield PAL, 1250 Maple Ave, South Plainfield, NJ 07080

Registration: \$30 Pre-registered (Mail-Online), \$35 walk-ins day of tournament
325 wrestlers Max

Time: **Split Session – 6 mats**

Bantam & Midget start at 9:00AM
Pee Wee, Junior & Intermediate start at 1:00PM

Weigh-Ins: **Friday Feb. 16th- 5:00PM – 8:00PM for all divisions**
Sunday 7:30AM – 8:30AM for Bantam & Midget
Sunday 11:00AM – 12:00PM for Pee Wee, Junior & Intermediate

SP PAL Wrestling Facility, 1250 Maple Ave, South Plainfield, NJ

Awards: 1st, 2nd, 3rd place medals will be awarded

Rules: NJ Scholastic wrestling rules apply, modified double elimination, no high school wrestlers, singlet & headgear required. Pee Wee, Bantam, Midget 1-1-1 periods, Junior & Intermediate 1-1½-1½ periods.

Format: Madison Weights, Modified Double elimination, 3 & 4 man round robins if necessary

Divisions: Pee Wee (2011-2012), Bantam (2009-2010), Midget (2007-2008), Junior (2005-2006), Intermediate (2003-2004)

REGISTER ONLINE (closes 8 pm 2/17 or when 325 wrestlers are registered)
BY GOING TO: www.eztourns.com

For more information please contact, Jeff Jacome at 908-731-2446 or email:
jeffjacome1017@gmail.com Please make checks payable to SPWC and mail application to: Jeff
Jacome, 200 Oakmoor Ave., South Plainfield NJ 07080

Name _____ Team/Town/Club _____

Address _____

Date of Birth ____/____/____ Age _____ Phone _____

Division _____ Weight _____ E-Mail _____

I am the parent/legal guardian of the above wrestler and give permission for him/her to participate in the 43rd Annual South Plainfield Wrestling Tournament on Sunday, February 19, 2017. I understand that physical and life threatening risks are involved with my child's participation and fully assume responsibility for these risks. I hereby hold harmless the South Plainfield Wrestling Club, wrestling coaches, referees, trainers and any other volunteers from any and all claims incurred as a result of this event. My signature below confirms my understanding with these conditions:

Parent or Legal Guardian

Name _____ Signature _____ Date _____